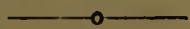




ROTHERHAM RURAL DISTRICT  
COUNCIL

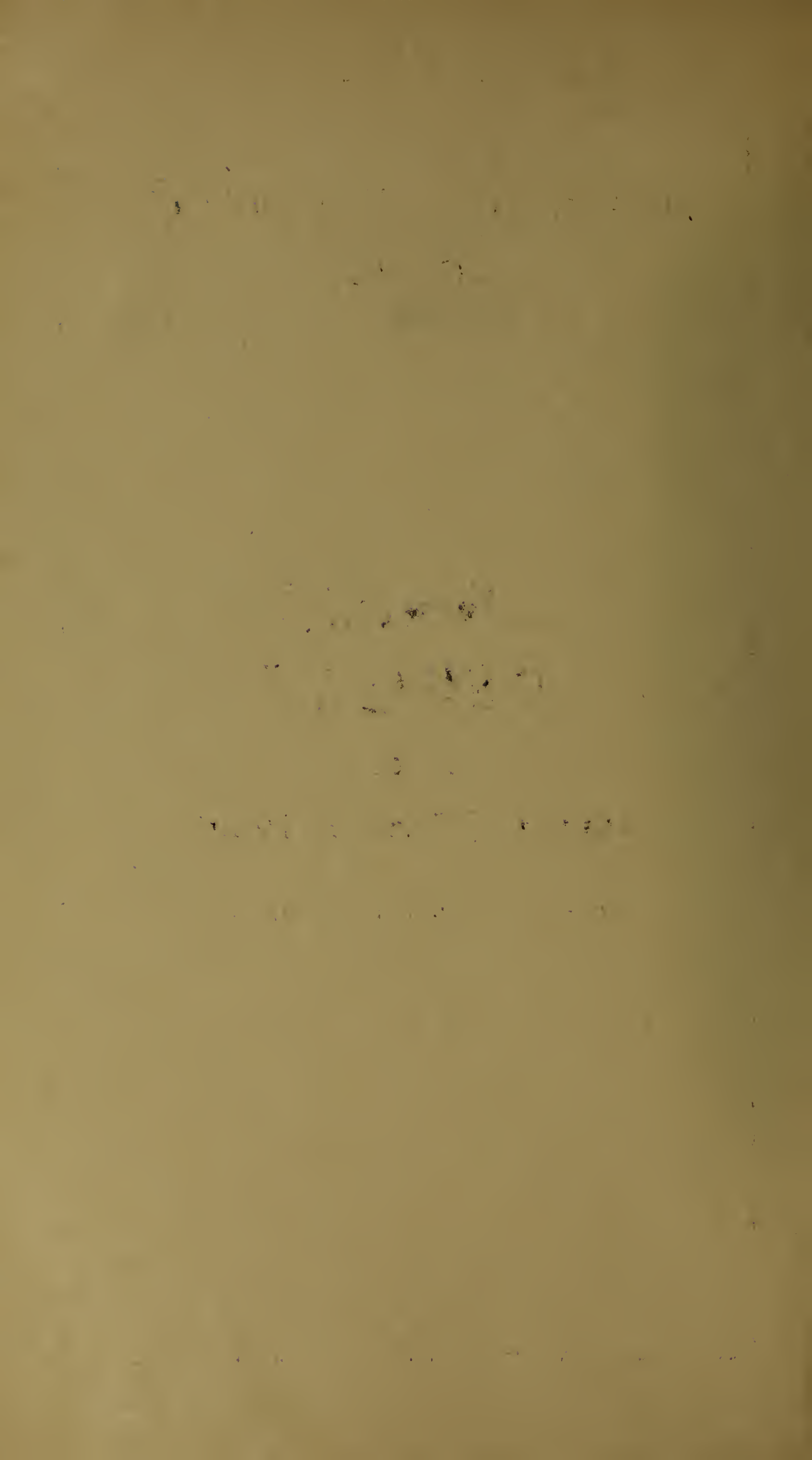


**ANNUAL  
REPORT**

of the

Medical Officer of Health

FOR THE YEAR ENDED 31st DECEMBER 1969



# ROTHERHAM RURAL DISTRICT COUNCIL

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## Members of the Public Health Committee

Chairman: Councillor J. Allott

### Councillors:-

F. A. Ambler

Mrs. D. M. Harrop

D. G. Bartholomew

F. J. C. Howlett

G. C. Bentley

Mrs. D. B. Manning, J.P.

Mrs. B. A. Boot

N. Moore

J. C. Cawdron, M.M.

C. C. Newsholme

F. Cooper

F. H. Pawson, J.P.

W. Ducker

Mrs. J. Scott

J. W. Duckham

T. A. Shaw

K. Green

W. H. Walker

G. E. Griffin

Chairman of the Council: Councillor J. W. Duckham

<u>Divisional Medical Officer:</u>	Dr. J. T. Clow
<u>Departmental Medical Officer:</u> <u>(Full-time)</u>	Dr. M. J. Hallinan
<u>Departmental Medical Officers:</u> <u>(Part-time)</u>	Dr. M. Elliot Dr. C. Taylor Dr. M. J. Daly Dr. P. J. Elson
<u>Departmental Medical Officer:</u> <u>(Part-time for Health Education</u> <u>activities)</u>	Dr. E. M. Harvey
<u>Psychiatrist:</u>	Dr. S. Hoyes
<u>Psychologist:</u>	Mrs. F. A. Brown Mr. P. W. Atkinson
<u>Ophthalmologist:</u>	Dr. S. Bannerjee
<u>Speech Therapist:</u>	Miss M. E. Bromley
<u>Peripatetic Teacher for the Deaf:</u> <u>(Doncaster School for the Deaf)</u>	Mr. W. Jenkinson
<u>Divisional Nursing Officer:</u>	Mrs. A. Brooks
<u>Nursing Staff:</u>	For details, see tables on attachment, etc., at the back of this report.
<u>Social Worker:</u>	Mrs. S. M. Freeman
<u>Dental Surgeons:</u>	Mr. M. S. Ormesher (Senior) Mrs. P. A. Duffield Harding Mrs. M. G. Brown
<u>Divisional Administrative Officer:</u>	Mr. A. Hill
<u>Divisional Senior Clerk:</u>	
Mr. F. Appleby	Nursing equipment, M.H.S. finance, salaries, etc.



Clerks:

Miss N. Gallimore	Typing, Child-minding and Establishment records
Mrs. E. Robinson )	Statistics
Miss P. Elliot )	"
Miss M. Lawson, P/T )	"
Mrs. C. Dickinson	Supplies and Finance
Miss P. Fitzmaurice )	Home Helps
Mrs. J. Kirton )	"
Mrs. M. Horsman, P/T )	"
Mrs. V. Twigg )	School Medical Section
Mrs. M. Hague, P/T )	" " "
Mrs. R. Ineson, P/T )	" " "
Mrs. B. Artell, P/T )	" " "
Mrs. M. I. Foster	Typing and S. M. S. work
Miss E. Sutcliffe	" " " "
Mrs. P. M. Horner, P/T	Child Guidance Clinic
Mrs. A. Allott, P/T	Clerk
Miss J. Savage	Enquiries
Mrs. M. C. Hill, P/T	Food Sales

Mental Welfare Officers:

Mr. R. W. Potts  
Mr. J. Scott

Maltby Training Centre Staff:

Supervisor:

Mr. J. M. Dey

Senior Teacher:

Miss H. M. Broadbent

Male Instructor:

Mr. R. Smith

Senior Female Instructor:

Mrs. E. Clarke

Instructor:

Mrs. S. Garbett

Assistant Supervisors:

Mrs. S. McGoldrick  
Mrs. A. Callahan  
Miss M. E. Brammer  
Mrs. A. Fereday  
Miss J. A. Greenhalgh

Assistant Supervisors:  
(Special Care Unit)

Mrs. H. Brydone  
Mrs. I. M. Claxton  
Mrs. A. Stepanek

Attendant:

Mrs. H. Bennett

Cook:

Mrs. E. Chapman

Assistants:

Mrs. M. Kirk  
Mrs. O. Johnson

Rotherham Rural District Council  
Public Health Department Staff:

Chief Public Health Inspector:

Mr. L. H. Cook

Deputy Chief Public Health Inspector:

Mr. J. Eastwood

Public Health Inspectors:

Mr. B. Barnes  
Mr. C. Almgill

Clerks:

Mr. R. L. Shaw  
Mr. G. Evans

Typist:

Mrs. L. Edgar

Smoke Control Investigator:

Mrs. E. Acomb

Rodent Operatives:

Mr. T. A. G. Knight  
Mr. A. Allen



To the Chairman and Members of the Health Committee

Ladies and Gentlemen,

It is my pleasure to submit to you my annual report on the health of the district for 1969. The report is in a slightly different form from that adopted in previous years, in that my own comments on the work of a particular section of our services are included in that section, in addition to the comments supplied by my staff. An index is appended so that if members wish to refer to a particular facet of our work, they can easily do so. This introduction to the report summarises the progress that has been made in 1969 and, again, outlines particular ways in which fresh services can be introduced and present ones improved.

During 1969, further attempts were made to set up family planning clinics within the Division, and these finally opened in early 1970 at Brinsworth and Wickersley. After only a few months, they seem to be much appreciated and it is hoped that further clinics will be opened within the next year.

At the present time, there are several schemes in the offing to extend the clinic and health centre facilities within the area. New or replacement clinics/health centres are envisaged at Brampton Bierlow and Dalton, Swallownest and Maltby, together with extensions at Kiveton Park and, possibly, Wickersley. It is hoped that at least two of these projects will begin during the financial year 1970/71, and the others should follow in the year 1971/72.

During the year, two further members of medical staff were appointed - Dr. M. J. Daly and Dr. P. J. Elson. Both of these ladies are permanent part-time departmental medical officers, carrying out the majority of their work during the school terms, a form of appointment which is becoming increasingly popular with married women doctors. At the moment, we are experiencing considerable difficulty in recruiting medical staff to the public health service (as members will know, there has been no deputy medical officer of health in this Division for  $4\frac{1}{2}$  years now), and it is particularly pleasing to have two experienced doctors joining our ranks.

In the body of my report, I have mentioned the fact that consultant paediatric clinics have been discontinued in the Division. As members will recall, Dr. C. C. Harvey, did a good deal of work in this field in this Division, in Division 26 (Wath-on-Deane), and to a lesser extent, in Division 27 (Doncaster). It is a sobering thought that the paediatric services in an area which covers perhaps 280,000 people, have been without a permanent children's specialist in both the curative and preventive field for close on two years now. A succession of locum consultants, however able, does not give the continuity so essential in this type of work.



During the past year, a good deal of publicity has been given to the care of patients suffering from acute mental illness and the severely subnormal mental patient - particularly the latter. Many patients who have been looked after in large hospitals for the mentally subnormal could well be cared for within the community, provided that adequate "sheltered" living accommodation and/or employment is available. Efforts are being made in this area to expand these hostel and sheltered workshop facilities and the help which local councils have given to this end, is much appreciated. In addition to these physical improvements, it will be essential for the hospitals concerned to work closely with the local services to ensure that the transfer of such patients back to community life is accomplished as smoothly as possible. There will, of course, be difficulties in this direction, but I am sure that this humane and enlightened policy will pay considerable dividends in the long term.

In my report for 1968, I devoted some space to the question of health education in schools. Just at the end of 1969, Dr. E. M. Harvey joined the staff to assist in this work and during the coming year, I hope that considerable progress will be made in this direction.

During 1969, a number of proposals for the reform of the medical and social services of local government were formulated. At the time of writing this report there has just been a change of government and it would seem likely that the ideas on the integration of the health services, as proposed in the second Green Paper, could well be revised, as could those suggested for local government reorganisation. It is difficult at this stage to speculate how much delay will occur as a result of this revision, but it is well known that the present government is in favour of some two-tier system of, at least, local government. Despite this, however, the setting up of a local authority social services department, as recommended by the Seebohm Committee, will undoubtedly occur in the near future, as the Local Authority Social Services Bill became law shortly before the end of the past Parliament.

As a result of this new legislation, certain sections of the work of my department will become the responsibility of the Local Director of the Social Services Department. These will include the home help services, responsibility for adult training centres, the day care of children under five, day nurseries and child minders, and certain aspects of medical social work. These changes are likely to take place during the early part of 1971 and will need careful planning to ensure that the new department can inherit an effective service and to see that the general public are inconvenienced as little as possible. For my part, I am only too anxious that every assistance is given to the new department, as I am quite sure that it will require considerable help from ourselves.



During the year, a very important Housing Bill was passed, increasing the scope of local authority aid to householders, seeking to improve and upgrade their property, and also inviting local authorities to designate areas of sub-standard housing as improvement areas. It is a little early to judge the effect of this latest Housing Act, but indications are that it could result in a widespread improvement in large numbers of older houses. At the time of writing, I notice that grants for improvement have increased by something like a third during 1969, as compared with the previous year. Certainly in Maltby and in the Rotherham Rural Area, quite substantial improvement areas have been designated, and any householder who is thinking of upgrading his property would be well advised to discuss his proposition with my Chief Public Health Inspectors (as in the case of Kiveton Park R.D.C. and Maltby U.D.C.) or with the surveyor's department of Rotherham R.D.C.

Pollution of the environment is very much the "in subject" these days, heightened, of course, by the fact that 1970 is World Conservation Year. At the risk of being boringly repetitious, I feel every one of us must consider most carefully our present environment and how we can preserve and improve it. Certain great cities in highly developed industrial countries (Los Angeles, New York and Tokyo, to name but a few), are experiencing considerable difficulties as a result of atmospheric pollution, and two of five Great Lakes in Central U.S.A. and Canada, are little more than industrial sewers. Coming nearer home, the Rivers Don and Rother show considerable evidence of industrial pollution, whilst the dereliction caused by old colliery workings and slag heaps is a constant affront to the eye.

Within the West Riding, it is estimated that at least 200 acres of land become derelict each year and we have about 9,000 acres in the administrative County to deal with at present. However, one should take heart from the excellent job of reclamation which has been done at Waleswood and press forward with other schemes. Most of the major schemes require finances which are outside the scope of local Councils, but I am sure that many similar derelict areas could be reclaimed by some of the larger District Councils.

The question of Clean Air is always a somewhat controversial topic in a mining community but, nevertheless, the burning of raw coal in domestic grates is rather an anachronism in this day and age. Once the shortage of smokeless, solid fuel is overcome, then it is to be hoped that progress can be made in our own area in implementing the Clean Air Act. After all, in this direction, Sheffield has made more progress than any other large industrial city in Europe, and Rotherham County Borough already has 35% or so of its houses smoke controlled. So it would seem logical to make a start on smoke control measures in those parts of my Divisional area which adjoin the two County Boroughs. A further point is that large industrial concerns such as the British Steel Corporation (at their Steel, Peech and Tozer and Parkgate Works), are spending many hundreds of thousands of pounds

during the next few years in a big effort to solve their own pollution problems.

The combating of all types of pollution will require considerable effort (with a good deal of money), from every section of the community, but if we and our children are to enjoy a reasonable environment, then these "nettles" must be grasped.

In conclusion, I would like to thank Mr. Allot, the Chairman of the Public Health Committee and all its members for their encouragement and support during the past year. In addition, I would like to express my appreciation of all the work carried out by Mr. Cook and his colleagues, and by my own County Council staff, particularly the members of the Divisional Office, the Nursing personnel and the Home Helps whose work brings them into close contact with members of the general public.

I am, Mr. Chairman, Ladies and Gentlemen,

Your Obedient Servant,

J. T. Lewis.

Medical Officer of Health

Divisional Health Offices,  
Grove Road,  
ROTHERHAM.

Rotherham 3131-2-3 and 78056



# ROTHERHAM RURAL DISTRICT COUNCIL

## ANNUAL REPORT OF THE MEDICAL OFFICER OF HEALTH FOR THE YEAR 1969

### GENERAL AND VITAL STATISTICS

Area in acres .. .. .	28,972
Population (Census 1961) .. .. .	59,100
Population (Estimated mid-1969) .. .. .	66,690
Number of houses (as per Rating list) .. .. .	20,996
Rateable value at 1.4.69. .. .. .	£1,771,860
Product of the penny rate .. .. .	£7,038

### Population

The increase in population was maintained during 1969, the estimated mid-year total being 66,690.

The following table gives the estimated parish distribution of the population for 1969:-

<u>Parish</u>	<u>Population</u>
Aston-cum-Aughton	9,699
Bramley	4,952
Brampton Bierlow	3,670
Brinsworth	8,116
Catcliffe	1,830
Dalton	7,593
Hooton Levitt	120
Hooton Roberts	171
Orgreave	926
Ravenfield	1,277
Thrybergh	5,143
Thurcroft	7,838
Treeton	2,304
Ulley	206
Wentworth	1,405
Whiston	4,277
Wickersley	7,163
<b>TOTAL</b>	<b>66,690</b>



	Local Authority Area			England and Wales (Totals)
	Males	Females	Total	
<u>Live Births</u>				
Total	657	616	1,273	797,542
Legitimate	624	578	1,202	730,500
Illegitimate	33	38	71	67,042
<u>Stillbirths</u>				
Total	5	3	8	10,662
Legitimate	5	3	8	9,555
Illegitimate	-	-	-	1,107
<u>Total live and stillbirths</u>				
Total	662	619	1,281	808,204
Legitimate	629	581	1,210	740,055
Illegitimate	33	38	71	68,149
<u>Deaths of infants</u> <u>under 1 year of age</u>				
Total	11	11	22	14,397
Legitimate	11	10	21	12,694
Illegitimate	-	1	1	1,703
<u>under 4 weeks of age</u>				
Total	6	9	15	9,603
Legitimate	6	8	14	8,494
Illegitimate	-	1	1	1,109
<u>under 1 week of age</u>				
Total	6	5	11	8,232
Legitimate	6	4	10	7,266
Illegitimate	-	1	1	966
<u>Deaths - all ages</u>	282	259	541	579,463

	Local Authority area	England and Wales
<u>Live birth rates, etc.</u>		
Live births per 1,000 home population (crude rate)	19.1	16.3
Area comparability factor	.86	1.00
Local adjusted rate	16.4	16.3
Ratio of local adjusted rate to national rate	1.01	1.00
Illegitimate live births as percentage of all live births	6	8
<u>Stillbirth rate</u>		
Stillbirths per 1,000 total live and stillbirths	6	13
Maternal mortality, including abortion	1	-
<u>Infant mortality rates</u>		
Deaths under 1 year per 1,000 live births	17	18
Deaths of legitimate infants under 1 year per 1,000 legitimate live births	17	17
Deaths of illegitimate infants under 1 year per 1,000 illegitimate live births	14	25
<u>Neo-natal mortality rate</u>		
Deaths under 4 weeks per 1,000 live births	12	12
<u>Early neo-natal mortality rate</u>		
Deaths under 1 week per 1,000 total live births	9	10
<u>Perinatal mortality rate</u>		
Stillbirths and deaths under 1 week combined per 1,000 total live and stillbirths	15	23
<u>Death rates, etc. - all ages</u>		
Deaths per 1,000 home population (crude rate)	8.1	11.9
Area comparability factor	1.48	1.00
Local adjusted rate	12.0	11.9
Ratio of local adjusted rate to national rate	1.01	1.00



Parish Distribution of Live and Stillbirths

Parish	Live Births	Still Births
Aston-cum-Aughton	199	1
Bramley	145	2
Brampton Bierlow	48	-
Brinsworth	199	1
Catcliffe	47	2
Dalton	129	1
Hooton Levitt	2	-
Hooton Roberts	1	-
Orgreave	24	-
Ravenfield	30	-
Thrybergh	101	-
Thurcroft	144	1
Treeton	39	-
Ulley	1	-
Wentworth	23	-
Whiston	53	-
Wickersley	88	-
Totals	1,273	8

Trend of Infant Deaths over the Past Ten Years

YEAR	Live Births	Infants Deaths	Infant Death Rates
1960	1,242	29	23
1961	1,260	45	36
1962	1,310	39	30
1963	1,331	35	27
1964	1,338	33	24
1965	1,332	27	20
1966	1,351	30	22
1967	1,313	22	17
1968	1,318	24	18
1969	1,273	22	17



Stillbirths - Rotherham Rural District

<u>Birth Weight</u>	<u>Cause of Death</u>
Not weighed	Macerated foetus
3 lbs. 11½ ozs.	1.a. Foetal Ascites Stillbirth b. Imperforate uretha with cystic distention of bladder
3 lbs. 12 ozs.	1.a. Stillbirth b. Anencephaly
4 lbs. 13 ozs.	1.a. Anencephalus
2 lbs. 2 ozs.	1.a. Asphyxia b. Breech delivery
4 lbs. 9¾ ozs.	1.a. Foetal Asphyxia b. Antepartum haemorrhage c. Abruptio - Placentae
8 lbs. 14 ozs.	1.a. Anencephaly
3 lbs.	1.a. Foetal Anoxia b. Compression of Cord

Infants Deaths - Rotherham Rural District

<u>Birth Weight</u>	<u>Age at Death</u>	<u>Cause of Death</u>
4 lbs. 4 ozs.	22 hours	1.a. Congenital heart b. Prematurity
7 lbs. 2 ozs.	2 months	1.a. Acute cardiac Pulmonary failure due to acute infection of the respiratory tract
8 lbs. 9 ozs.	1 hr. 10 mins.	1.a. Asphyxia b. Cord round neck
2 lbs. 4 ozs.	1 day	1.a. Respiratory distress syndrome b. Prematurity
8 lbs.	3 weeks	1.a. Oedema of the lung due to b. Acute infection of the respiratory tract
6 lbs. 13 ozs.	1 day	1.a. Respiratory distress syndrome b. Grade III Hyaline Membrane disease
7 lbs. 9 ozs.	5 weeks	1.a. Gastro Enteritis Organism not identified

# Infant Deaths (Continued)

<u>Birth Weight</u>	<u>Age at Death</u>	<u>Cause of Death</u>
6 lbs. 12 ozs.	5 days	Congenital deformity of the heart (Ventricular septal defect) Common aorto pul. trunk
7 lbs. 4 ozs.	10 days	1.a. Congestive heart failure b. Congenital heart disease
8 lbs.	4 months	1.a. Acute obstructive tracheobronchitis (Haemophilus Influenza)
8 lbs. 14 ozs.	24 days	1.a. Tracheobronchitis b. Cerebral haemorrhage
7 lbs. 5 ozs.	1 day	1.a. Cerebral Anoxia b. Repeated Cardiac Arrest
6 lbs.	6 months	Cerebral contusion assoc. with fractured skull and extensive intracranial haemorrhage (road accident)
6 lbs. 11 ozs.	1 week	1.a. Oedema of the brain and lung due to b. Acute cardiac failure
6 lbs. 4 ozs.	11 hours	1.a. Atelectasis b. Post maturity
4 lbs. 1 oz.	1 day	1.a. Prematurity
3 lbs.	36 hours	1.a. Prematurity b. Respiratory distress
3 lbs. 11 ozs.	5 days	Prematurity with respiratory distress syndrome
5 lbs. 7 ozs.	5 months	1.a. Congenital heart disease
1 lb. 12 $\frac{1}{4}$ ozs.	3 days	1.a. Respiratory failure b. Prematurity
4 lbs. 2 ozs.	4 months	1.a. Acute purulent bronchitis due to b. Infection with strep- pneumonial 11. Bilateral otitis media
4 lbs. 3 ozs.	1 day	1.a. Pulmonary Atelectasis b. Prematurity

A pleasing feature during the past year has been the marked drop in the perinatal mortality rate, largely caused by a halving of the number of stillbirths. This can, I think, be attributed to higher standards of ante-natal care within the



area. The infant death rate has remained much the same - a high proportion of these deaths occurred in the first few days of life and are often associated with severe congenital abnormalities and/or premature birth. However, there are still quite a number of infants who died from acute respiratory infection, despite the very effective antibiotics available nowadays. These deaths are probably due to virus infections which are frequently insensitive to this form of therapy.

During adult life, once again, diseases of the circulatory system were the main cause of death, but it was pleasing to note that deaths from carcinoma of the bronchus within the division, had declined from 50 - 42 during the year. Deaths from suicide, motor vehicle accidents, and all other types of accident have declined but, of course, the figures are too small to be of any real statistical significance.



DEATHS - Rotherham Rural District

Cause of Death	Sex	All Ages	Under 4 weeks	4 weeks & under 1	Age in years									
					1-	5-	15-	25-	35-	45-	55-	65-	75 & over	
Enteritis and other diarrhoeal diseases	M	1	-	1	-	-	-	-	-	-	-	-	-	-
Tuberculosis of respiratory system	F	-	-	-	-	-	-	-	-	-	-	-	-	-
	M	1	-	-	-	-	-	-	-	-	-	-	1	-
Syphilis and its sequelae	F	1	-	-	-	-	-	-	-	1	-	-	-	-
	M	-	-	-	-	-	-	-	-	-	-	-	-	-
Malignant neoplasm, buccal cavity, etc.	F	-	-	-	-	-	-	-	-	-	-	-	-	-
	M	2	-	-	-	-	-	-	1	-	-	-	1	-
Malignant neoplasm, oesophagus	F	1	-	-	-	-	-	-	-	-	-	1	-	-
	M	2	-	-	-	-	-	-	-	1	-	-	-	-
Malignant neoplasm, stomach	F	8	-	-	-	-	-	-	-	-	1	-	4	3
	M	2	-	-	-	-	-	-	-	-	2	-	-	1
Malignant neoplasm, intestine	F	12	-	-	-	-	-	-	-	1	-	-	5	2
	M	15	-	-	-	-	-	-	-	-	-	4	6	4
Malignant neoplasm, larynx	F	1	-	-	-	-	-	-	-	-	-	1	-	-
	M	-	-	-	-	-	-	-	-	-	-	-	-	-
Malignant neoplasm, lung, bronchus	F	22	-	-	-	-	-	-	-	-	5	-	5	7
	M	2	-	-	-	-	-	-	-	-	-	-	1	1
Malignant neoplasm, breast	F	-	-	-	-	-	-	-	-	-	-	-	-	-
	M	13	-	-	-	-	-	-	-	-	4	2	2	5
Malignant neoplasm, uterus	F	7	-	-	-	-	-	-	-	1	1	-	-	-
	M	2	-	-	-	-	-	-	-	-	-	-	1	1
Malignant neoplasm, prostate	M	2	-	-	-	-	-	-	-	-	-	-	1	1
	M	1	-	-	-	-	-	-	-	-	-	-	1	-
Leukaemia	F	1	-	-	-	-	-	-	-	-	-	-	1	-
	M	1	-	-	-	-	-	-	-	-	-	-	1	-
Other Malignant neoplasms	F	8	-	-	-	-	-	-	1	-	1	4	2	-
	M	14	-	-	-	1	-	-	-	-	4	-	5	4
Benign and unspecified neoplasms	F	1	-	-	-	-	-	-	-	-	-	-	1	-
	M	-	-	-	-	-	-	-	-	-	-	-	-	-

DEATHS (Continued)

Cause of Death	Sex	All Ages	Under 4 weeks	4 weeks & under 1	Age in years								
					1-	5-	15-	25-	35-	45-	55-	65-	75 & over
Diabetes mellitus	M	2	-	-	-	-	-	-	-	-	-	1	1
	F	6	-	-	-	-	-	-	-	1	-	2	3
Other endocrine etc. diseases	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	2	-	-	-	-	-	-	-	1	-	-	1
Mental disorders	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	-	-
Other diseases of nervous system etc.	M	1	-	-	-	-	-	-	-	-	-	1	1
	F	2	-	-	-	-	-	-	-	-	-	1	-
Chronic rheumatic heart disease	M	2	-	-	-	-	-	-	-	-	-	2	-
	F	4	-	-	-	-	-	-	-	1	-	3	1
Hypertensive disease	M	6	-	-	-	-	-	-	-	-	1	-	2
	F	4	-	-	-	-	-	-	-	-	-	2	2
Ischaemic heart disease	M	73	-	-	-	-	1	2	5	10	19	19	17
	F	56	-	-	-	-	-	-	3	1	8	18	26
Other forms of heart disease	M	11	-	-	1	-	-	-	-	-	3	5	3
	F	11	-	-	-	-	-	-	-	-	3	1	9
Cerebrovascular disease	M	26	-	-	-	-	-	-	1	1	3	6	15
	F	33	-	-	-	-	-	-	3	-	4	11	15
Other diseases of circulatory system	M	15	-	-	-	-	-	-	-	1	-	3	11
	F	16	-	-	-	-	-	-	-	-	-	3	13
Influenza	M	1	-	-	-	-	-	-	-	1	-	-	-
	F	2	-	-	-	-	-	-	-	-	-	1	1
Pneumonia	M	11	-	-	1	-	-	-	1	-	-	4	5
	F	13	-	-	-	-	-	1	-	2	-	1	9
Bronchitis and Emphysema	M	28	-	-	-	-	-	-	-	2	5	12	9
	F	14	-	-	-	-	-	-	-	-	1	4	9
Asthma	M	2	-	-	-	1	1	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	1	-
Other diseases of respiratory system	M	4	-	2	-	-	-	-	-	-	-	-	2
	F	5	1	-	-	-	-	-	-	-	2	-	2
Peptic ulcer	M	3	-	-	-	-	-	-	1	-	1	1	-
	F	-	-	-	-	-	-	-	-	-	-	-	-



# DEATHS (Continued)

Cause of Death	Sex	All Ages	Under 4 weeks	4 weeks & under 1	Age in years								
					1-	5-	15-	25-	35-	45-	55-	65-	75 & over
Intestinal obstruction and hernia'	M	1	-	-	-	-	-	-	-	-	-	-	1
	F	1	-	-	-	-	-	-	-	-	-	1	-
Cirrhosis of liver	M	2	-	-	-	-	-	-	-	-	2	-	-
	F	1	-	-	-	-	-	-	-	-	-	1	-
Other diseases of digestive system	M	2	-	-	-	-	-	-	-	1	-	-	1
	F	2	-	-	-	-	-	-	-	-	-	1	1
Nephritis and nephrosis	M	1	-	-	-	-	-	-	-	-	-	-	1
	F	2	-	-	-	1	-	-	-	-	-	1	-
Other diseases, genito-urinary system	M	1	-	-	-	-	-	-	-	-	-	-	1
	F	2	-	-	-	-	1	-	-	-	-	1	1
Abortion	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	1	-	-	-	-	-	-	-	-	-	-	-
Diseases of musculo-skeletal system	M	-	-	-	-	-	-	-	-	-	-	-	-
	F	3	-	-	-	-	-	-	-	-	-	-	3
Congenital anomalies	M	4	1	-	1	-	-	-	-	-	-	-	1
	F	3	1	-	-	-	-	-	1	-	-	-	-
Birth injury, difficult labour etc.	M	3	3	-	-	-	-	-	-	-	-	-	-
	F	5	5	-	-	-	-	-	-	-	-	-	-
Other causes of perinatal mortality	M	2	2	-	-	-	-	-	-	-	-	-	-
	F	2	2	-	-	-	-	-	-	-	-	-	-
Symptoms & ill-defined conditions	M	1	-	-	-	-	-	-	-	-	-	-	1
	F	2	-	-	-	-	-	-	-	-	-	-	2
Motor vehicle accidents	M	5	-	1	-	-	1	-	-	1	1	1	1
	F	1	-	-	-	-	-	-	-	-	-	1	-
All other accidents	M	9	-	-	2	2	1	1	1	1	-	-	-
	F	8	-	-	-	-	-	2	-	-	-	-	7
Suicide and self-inflicted injuries	M	4	-	-	-	-	-	-	1	1	-	-	-
	F	-	-	-	-	-	-	-	-	-	-	-	-
Total all causes	M	282	6	5	3	3	5	7	12	29	49	78	85
	F	259	9	2	1	2	-	2	12	15	28	66	122



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385	386	387	388	389	390	391	392
393	394	395	396	397	398	399	400

Parish Distribution of Infectious Diseases:

PARISH	Measles	Whooping Cough	Dysentery	Scarlet Fever	Meningitis	Food Poisoning	Infective Hepatitis
Aston-cum-Aughton	6	-	13	1	1	1	-
Bramley	13	-	1	3	-	-	2
Brampton Bierlow	5	-	-	1	-	-	-
Brinsworth	11	-	-	8	-	-	1
Catcliffe	13	-	1	2	-	-	-
Dalton	5	-	3	3	3	-	-
Hooton Levitt	-	-	-	-	-	-	-
Hooton Roberts	-	-	-	-	-	-	-
Orgreave	5	2	-	-	-	-	1
Ravenfield	1	-	1	-	-	-	-
Thrybergh	3	-	-	-	-	-	-
Thurcroft	2	1	30	6	1	-	1
Treeton	2	-	1	2	-	-	-
Ulley	-	-	-	-	-	-	-
Wentworth	5	-	-	1	-	-	-
Whiston	3	-	4	4	1	-	-
Wickersley	-	-	2	3	1	-	-
TOTALS :	74	3	56	34	7	1	5

Age Distribution of Infectious Diseases notified during 1969

DISEASE	Under 1 year	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-24 years	25 years plus	Age Unknown	Total
Measles	7	8	11	9	11	25	-	1	-	2	74
Whooping cough	1	1	-	-	-	1	-	-	-	-	3
Scarlet fever	-	-	2	1	5	18	6	2	-	-	34
Meningitis	-	-	-	-	1	4	-	-	2	-	7
Infective Hepatitis	-	-	-	-	1	1	1	2	-	-	5
Dysentery	8	6	5	4	3	12	3	5	8	2	56
Food Poisoning	-	-	-	-	-	-	1	-	-	-	1



Tuberculosis

Rotherham Rural District

	<u>Pulmonary</u>		<u>Non Pulmonary</u>	
	<u>Males</u>	<u>Females</u>	<u>Males</u>	<u>Females</u>
Number of cases on register at 1.1.69. . . . .	103	72	27	29
Number of cases notified for the first time during year	6	2	2	-
Number of cases added to register . . . . .	2	-	-	-
Number of cases removed from register . . . . .	17	15	-	2
Number of cases remaining on the register at 31.12.69.	94	59	29	27

Cancer of the Lung

I give below the numbers of deaths from cancer of the lung in men and women for the last five years:-

Year	Cases of lung cancer in men	Cases of lung cancer in women	TOTAL
1965	19	2	21
1966	21	1	22
1967	19	4	23
1968	32	2	34
1969	22	2	24

The number of cases of measles notified during the past year showed a dramatic drop from 1968. This may have been due in part to the use of measles vaccine, but could have occurred as a natural result of the down swing in cases of measles which occurs in the two-yearly cycles this disease exemplifies.

In March 1969, measles vaccination was suspended due to the difficulties encountered with one particular type of vaccine and was not resumed until late February 1970. It is to be hoped that once immunisation becomes generalised, this annoying and sometimes serious infection will be drastically reduced and finally eliminated.

During the year, we had a mild outbreak of sonne dysentery in one particular area which smouldered on for about three months. Fortunately, there were only 30 - 40 cases during this time and the symptoms were relatively mild.

1-1-1917

1-1-1917

75

75

75

75

1-1-1917

1-1-1917

1-1-1917

1-1-1917

1-1-1917

1-1-1917

1-1-1917

1-1-1917

1-1-1917

CARE OF MOTHERS

AND YOUNG CHILDREN

1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917

1-1-1917

1-1-1917

1-1-1917

1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917
1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917	1-1-1917



Domiciliary and Institutional Births

Details	Births				Totals
	<u>Domiciliary</u> <u>Live</u>	<u>Still</u>	<u>Institutional</u> <u>Live</u>	<u>Still</u>	
Primary notifications received	417	3	1,148	5	1,573
Inward transfers	2	-	1,119	15	1,136
Total notifications received	419	3	2,267	20	2,709
Outward transfers	3	-	577	5	585
Total adjusted notifications	416	3	1,690	15	2,124

Midwifery

The expected patterns of Midwifery Services continued during the past year, with a further decrease in domiciliary confinements from 548 to 419.

To aid improved communications, a Night Rota System commenced at the beginning of the year. This has proved very successful and minimised the frustrations of patients and delays to staff. The success of the scheme has only been made possible by the tremendous co-operation of the Ambulance Staff and our own nursing personnel.

The increased number of disposable items of equipment and improved contents of packs has been very satisfactory.

The midwives are now spending more time attending cervical cytology clinics, in some cases in special sessions, or at the end of the ante-natal clinics.

The staff situation remained fairly constant with two resignations and two appointments, making a total of 10 full time and 3 part time midwives.

Number of deliveries attended by Midwives in the area during the year					Cases in Instit- utions
Domiciliary Cases					
Doctor not Booked			Doctor Booked		
Doctor present at any stage of labour	Doctor not present at any stage of labour	Doctor present at any stage of labour (either the booked doctor or another)	Doctor not present at any stage of labour	Totals	
4	13	162	240	419	1,153

Number of cases delivered in institutions but attended by Domiciliary Midwives on discharge:-

(i)	At forty-eight hours	...	...	...	...	475
(ii)	After forty-eight hours, up to and including the fifth day	...	...	...	...	502
(iii)	After the fifth but before the tenth day	...	...	...	...	303
Total						1,280

#### Obstetric Flying Squad

Number of occasions services called upon during year - 4

#### Administration of Inhalational Analgesics

Cases where analgesia was administered by Domiciliary Midwives:-

(a)	Pethidine	...	...	...	...	104
(b)	Trilene with Pethidine	...	...	...	...	128
(c)	Trilene alone	...	...	...	...	87

#### Statutory Notices

Eight statutory notices in respect of stillbirths, two for liability to be source of infection and one for death of child, were received from Midwives in the Division during the year.

General practitioners were called in to give medical aid at, or in connection with domiciliary confinements in 15 instances.

#### Medical Aid Notices

Issued for :-	Number issued because of complications arising in/during -			
	Pregnancy	Labour	Lying-in	The Child
Domiciliary cases	-	12	2	1

#### Ophthalmia Neonatorum

No cases were notified in the Division during 1969.

#### Phenylketonuria Testing

Number of babies tested	...	...	...	...	1,867
During the fourth week of age or under	...	...	...	...	1,159
Over four weeks, but less than six weeks	...	...	...	...	439
Six weeks of age or over	...	...	...	...	269

All the tests were found to be negative



# ANTE-NATAL, MOTHERCRAFT AND RELAXATION CLASSES

Name of Clinic	Number of women who attended during the year			Total number of attendance made during the year		
	Institutionally booked	Domiciliary booked	Total	Institutionally booked	Domiciliary booked	Total
(1)	(2)	(3)	(4)	(5)	(6)	(7)
Brinsworth	23	-	23	111	-	111
Dalton	7	5	12	54	29	83
Dinnington	70	7	77	331	71	402
Kiveton Park	23	7	30	150	47	197
Maltby	55	1	56	466	13	479
Swallownest	32	-	32	213	-	213
Thurcroft	21	-	21	80	-	80
Wickersley	33	1	34	379	1	380
TOTAL -	264	21	285	1,784	161	1,945

In the main, Ante-natal Clinics are held by Family Doctors for their own patients and at Hospitals or Maternity Homes.

## Ortolani Test

- |     |   |     |     |     |     |   |
|-----|---|-----|-----|-----|-----|---|
| (a) | Number of babies referred to specialists during the year and confirmed as cases of congenital dislocation of the hip and splinted | ... | ... | ... | ... | 3 |
| (b) | Number of babies referred to specialists and said not to be cases of congenital dislocation of the hip                            |     |     |     |     | - |
| (c) | Number of babies referred to specialists, confirmed but not splinted  | ... | ... | ... | ... | 1 |

## Voluntary Committees

I would again like to take this opportunity of expressing my gratitude to members of the Voluntary Committees for the valuable help which they give to the mothers and staff at the various clinics in the area.

## Health Visiting

Many changes have taken place in the role of the Health Visitor in preceding years; she is now a well established family visitor.

The attachment scheme to Family Doctors has increased the work of most of our staff, with attendance at surgeries together with consultations with doctors and patients.

There still remains much work to do in clinics. While the health of the majority of young children today is of a high standard, this achievement is an evolving process and there is a continuing need for a preventive service. It is necessary to focus extra attention on special groups of children and parents, who will always need some type of support.

The handicapped children have required much more visiting, parents requiring extra help with the variety of gadgets now available to increase the independence of every type of disabled child.

The liason with hospitals has increased, for with extra staff, one Health Visitor is now in a position to visit all hospitals more frequently. During the past year, 56 visits were made to general hospitals with 15 visits to specialist hospitals.

The staff situation remained static at fifteen Health Visitors and five Assistant Health Visitors.

## Care of the Unmarried Mother and Her Child

103 cases in the Division were reported to me for attention during 1969.

49 mothers were under 20 years, 38 were 20-30 years and 16 were 30 years and upwards.

76 were single women, 23 married women but had illegitimate pregnancies; 4 were widowed or divorced women.

Settlement of these cases was as follows:-

69 mothers kept their babies	17 babies were adopted
4 babies were fostered	3 babies died
10 cases were settled by marriage	



Health Visiting and Tuberculosis Visiting

	Cases visited by Health Visitors	Number of cases (i.e. first visits)
1.	Total number of cases	12, 580
2.	Children born in 1969	2, 276
3.	Children born in 1968	1, 798
4.	Children born in 1964-67	2, 830
5.	Total number of children in lines 2 - 4	6, 904
6.	Persons aged 65 or over (excluding 'domestic help only' visits)	1, 205
7.	Number included in line 6 who were visited at the special request of a general practitioner or hospital	856
8.	Mentally disordered persons	51
9.	Number included in line 8 who were visited at the special request of a general practitioner or hospital	30
10.	Persons, excluding maternity cases, discharged from hospital (other than mental hospitals)	300
11.	Number included in line 10 who were visited at the special request of a general practitioner or hospital	259
12.	Number of tuberculous households visited (i.e. visits by health visitors not employed solely on tuberculosis work)	36
13.	Number of households visited on account of other infectious diseases	358
14.	Other cases	3, 726

# INFANT WELFARE CENTRES

Name of Centre	Number of children who attended during the year and who were born in:-			Total number of children who attended during the year	Number of attendance during the year made by children who were born in:-			Total attendances during the year
	1969	1968	1964-1967		1969	1968	1964-1967	
Brinsworth	178	196	238	612	1,961	2,156	1,062	5,179
Catcliffe	45	80	35	160	270	394	176	840
Cortonwood	58	56	51	165	809	982	552	2,343
Dalton	146	101	208	455	1,124	850	428	2,402
Dinnington	214	154	92	460	2,474	1,915	819	5,208
Kiveton Park	135	150	185	470	1,298	785	544	2,627
Maltby	268	327	68	663	2,373	1,758	309	4,440
Swallownest	197	231	279	707	1,759	1,553	1,133	4,445
Thurcroft	102	139	142	383	1,149	977	861	2,987
Treeton	28	67	42	137	264	270	128	662
Whiston	17	12	41	70	219	252	324	795
Wickersley	259	300	317	876	1,727	1,519	651	3,897
Woodsetts	19	17	10	46	211	149	36	396
Mobile Clinics	148	140	157	445	1,174	1,115	632	2,921
Totals	1,814	1,970	1,865	5,649	16,812	14,675	7,655	39,142



## Children Neglected or Ill-treated in their own Homes

One meeting of the Co-ordinating Committee was held in 1969, when general policy was discussed, particularly with regard to the number of meetings required of the whole Committee. The general consensus of opinion was that meetings of such a large Committee were mainly fruitless and that provided communication between the various departments was satisfactory, small area meetings would be much more efficacious.

At this meeting, the question of housing evictions was discussed very fully, particularly with regard to the National Coal Board tenants. There does not appear to be an easy solution to this problem, but it was decided that where eviction was contemplated, that each Local Authority Housing Department and the National Coal Board, should be asked to give us as much early warning as possible.

The local N. S. P. C. C. Inspector raised the question of a furniture store which could be used for supplying furniture to needy families. I have already been offered a fairly large room in one of the local Church Halls, but can find no means of obtaining monies for the rental of this room. The Children's Department have some small local funds available, but these would not be nearly sufficient to meet the cost.

Since I have had a Social Worker attached to my staff, I have been endeavouring to secure an up-to-date list of the problem families within the Divisional area. The Social Worker is clarifying these cases with the Health Visitors in each area, so that we can get a really up-to-date idea of the current situation. When this is done, it should be possible to start regular area meetings which will be attended by local officers of the requisite departments.

## Health Education

The Health Education activities carried out in all areas followed a similar pattern to that of previous years, with small variations to meet local needs.

## Infant Welfare Clinics

The range of programmes has been interesting, varied and well received. The displays of visual aids covering a wide range of subjects, have stimulated much discussion among mothers.

A very popular innovation at one clinic was the introduction of a series of weekly talks, given alternately by Health Visitor and Doctor.

There was a large attendance at these sessions, mothers displaying a keen interest with lively discussions at the conclusion of each talk. Subjects covered were, infant feeding, nutrition, growth and development, ailments in infancy, when and when not to call a Doctor, and birth control.

Films shown in clinics on a wide range of subjects numbered 32.

Groups of school leavers have attended infant clinic sessions for observations and instruction on mothercraft and child care; in one area, the group was a mixed one, boys showing equal interest with the girls.

## Schools

There are now eight senior schools in the Division operating a fixed programme which is shared between teacher and health visitor; this type of combined effort appears very successful, and not quite so time-consuming for



our staff. A request from the Education Department to our staff who give talks to school canteens on First Aid, Safety in the Kitchen and Personal Hygiene, was received at the end of the year; this programme will be repeated to other staffs during the coming year. In all cases, talks were supported by visual aids and films.

### Mothers' Clubs

The attendance at these Clubs are 30-40 each week, Health Visitors and District Nurses, have given talks on all aspects of health; talks on "The Care of the Elderly", were very popular and provoked much discussion.

### Cervical Cytology

Name of Clinic	Number of sessions held during the year	Number of patients attending for first time	Total number of smears taken	Number of patients with positive smears
Brinsworth	5	73	73	-
*Cortonwood	-	75	75	-
*Dalton	-	49	49	-
Dinnington	8	114	114	5
Kiveton Park	17	208	208	1
Maltby	14	154	154	-
Swallownest	31	376	376	1
*Wickersley	-	128	128	-
*Smears taken at Ante-Natal Sessions				
Totals:	75	1,177	1,177	7

### Nurseries and Child-minders Regulation Act, 1948, as amended by the Health Services and Public Health Act, 1968

From November 1st, 1968 it became law for all persons looking after young children under the age of 5, for gain, to be registered with the Local Health Authority. One of the main reasons for this legislation has been the exploitation of parents by unregistered child minders. Fortunately this did not constitute any great problem in this area, but it certainly was a hazard in many of the big cities. The Local Health Authority lays down standards on hygiene, safety, size of accommodation, etc., for all child minders, day nurseries and play groups.

It is very important that children who may be deprived, as a result of physical or emotional handicap or parental indifference, should have the opportunity of gaining the further intellectual stimulus which play groups, nursery schools etc., can provide.



A list of approved child minders and play groups is given below:-

#### Child Minders

Mrs. P. James, 1 Priory Way, Aston  
Mrs. E. M. Lavender, 11 Manvers Close, North Anston  
Mrs. E. M. Lenthall, 9 Ryton Road, South Anston  
Mrs. D. Little, 32 The Oval, North Anston  
Mrs. J. Middleton, 35 St. Stephen's Drive, Aston  
Mrs. D. Moyse, 7 Manor Close, Todwick  
Mrs. M. Paddock, 6 Bank Street, South Anston  
Mrs. M. E. Parkin, 162 Rotherham Road, Maltby  
Mrs. D. Perry, 70 The Oval, North Anston  
Mrs. G. E. Phillips, 32 Manor Road, Dinnington  
Mrs. M. Wainwright, 78 Church Lane, Dinnington  
Mrs. M. E. Widdison, 28 Carver Close, Harthill

#### Play Groups

The Parish Hall, Cross Street, Bramley  
The Parish Hall, Knollbeck Lane, Brampton Bierlow  
Mrs. W. M. Bellamy, 61 Ryton Road, North Anston  
St. Andrew's Hall, Brinsworth Road, Brinsworth  
The Middleton Institute, Barleycroft Lane, Dinnington  
The Welfare Institute, Winney Hill, Harthill  
Mission Hall, Bateman Road, Hellaby  
St. John's Church Rooms, Wales Road, Kiveton Park  
The Village Hall, Laughton  
St. Bede's Church Play Group, Salisbury Road, Maltby  
The Welfare Hall, Ryton Road, North Anston  
O.A.P. Centre, Birchwood Drive, Ravenfield  
The Hengist Hut No. 1, Rotherham Road, Swallownest  
The Parish Hall, Park Lane, Thrybergh  
Sports Pavilion, Orchard Lane, Thurcroft  
The Reading Room, Parish Hall, Front Street, Treeton  
Parish Church Institute, School Hill, Whiston  
The Barn, Church Lane, Wickersley  
Methodist Church Hall, Bawtry Road, Wickersley  
Oakland House, Woodsetts (Mrs. M. Ingham)

CARE AND AFTER-CARE

SERVICE



## Home Help Service

The Home Help Service was designed to assist families when the mother, or other person responsible for the domestic affairs, was taken ill or otherwise unable to deal with those arrangements. It was not intended to remove the family responsibility, particularly in the care of the aged. At the time of divisionalisation, three cases per week were receiving attention; the weekly total now is in the region of seven hundred.

Every effort is made to provide continuity of service when home helps are ill or on holiday, but this is not always possible, so a system of priorities is used. Efforts are also made to meet the preferences of individual patients, provided this does not interfere with the efficient working of the scheme. In the vast majority of cases, the service is much appreciated by the recipients. I am also assured that some of the home helps do more than they are required to do, or are paid for. My thanks go to them for this and for the way in which they deal with some of the more difficult cases.

The table below gives statistical details of the Home Help Service for the year 1969.

Number of Home Helps employed in the Division at 31.12.69. - 157

Cases provided with domestic help during the year:-

	Number of cases			Hours Employed
	From previous year	New Cases	Total	
(i) Aged 65 or over on first visit during year	599	205	804	136,264
(ii) Under 65 years of age on first visit during year:-				
(a) chronic sick and tuberculous	26	18	44	5,056
(b) mentally disordered	-	-	-	-
(c) maternity	5	81	86	4,834
(d) others	-	8	8	625
Totals -	630	312	942	146,779

## Chiropody

18 per cent of old age pensioners received chiropody treatment; the following table shows the details for the Divisional area.



Total number of patients treated in Divisional area			Total number of Treatments given											
			In Chiropodists' Surgeries			In Voluntary Association's premises or clinics			Domiciliary			Total number of treatment given		
P.	P.H.	E.M.	P.	P.H.	E.M.	P.	P.H.	E.M.	P.	P.H.	E.M.	P.	P.H.	E.
1995	224	1	1073	36	-	5514	110	2	3814	110	-	11501	256	2

### Home Nursing

The work load of the Home Nursing Service continues to increase, reflecting the earlier discharge of all types of patients from hospital units. There are many more patients referred, who require attention to dressings, removal of clips and sutures; the disposable dressing pack now issued on the EC.10 certificates has enabled the service to maintain a high professional standard so necessary in this sphere.

The largest number of patients continue to be the elderly and handicapped. The greatest problem to the nurse, are the patients who live alone, for need appears to increase at a far greater rate, than the expansion of the service.

The staff remained constant at 15 full time and 2 part time nurses.

One nurse attended the In-service Training Course at Grantley Hall, which dealt mainly with rehabilitation.

The following table gives details of the work carried out by Home Nurses in the Division:-

Classification	Number of cases attended by Home Nurses during the year	Number of visits paid by Home Nurses during the year
1. Medical	1,873	36,701
2. Surgical	715	13,905
3. Infectious diseases	35	99
4. Tuberculosis	29	1,639
5. Maternal complications	108	687
6. Other	37	76
TOTALS	2,797	53,107
Patients included above who were aged 65 or over at the time of the first visit during the year	1,256	33,747
Children included above who were under five years of age at the time of the first visit during the year	117	894
Patients included above who have had more than 24 visits during the year	542	37,867



### Night Nursing Service

The Night nursing service attended 62 patients during the past year, this was slightly less than the previous year, due possibly, to the inability to replace one member of the staff who resigned at the beginning of the year.

This service is appreciated by the families of these patients and many letters to this effect have been received.

### Provision of Nursing Equipment for Homes

The West Riding County Council provides a wide variety of equipment, ranging from bed pans to highly specialised Ripple Beds.

The larger items of equipment, e.g. hospital type beds, commode chairs, wheelchairs, etc. are directly controlled, stored at and issued from my Divisional office.

The services of a private transport contractor are engaged and a Home Delivery Service maintained for the type of equipment which cannot be conveniently collected by the patient's family and carried on Public Transport. A stock of the smaller items of equipment, e.g. bed pans, back rests, bed cradles, etc. is also held at my office. In addition, an allocation of the full range of the smaller items of equipment is held on a district basis. In the main, such equipment is stored at Child Welfare Centres, where it can be drawn from by District Nurses, other staff and members of the public. Often, if a District Nurse is attending, the required equipment will, if suitable, be carried in the Nurse's car to the patient concerned. It is emphasised, however, that nursing equipment is available to all in need and it is not a condition of issue that a District Nurse be attending the patient. The West Riding County Council makes no charge for equipment which is issued on loan and for which a receipt is obtained. Some authorities do, in fact, make a charge for similar services. The County Council gives two items, namely, male urinals and foam rubber or air rings, on a free of charge, non-return basis.

Naturally, problems of supply and demand do exist. It is not possible to ensure that every item from a very wide range of items which may be required, can be held in stock at any given moment. The smaller items are, however, mostly available at all times. Other items such as hospital type bedsteads and commodes which may not be available ex-stock, can often be supplied in 7 to 14 days, by purchase through the County Supplies Department. In addition, the County Council operates a scheme where stocks of equipment, held in other Divisions, can be transferred to any area where need is established. Transport is supplied by the County Supplies Department, or if economical, by a private transport contractor. The services of a private transport contractor, are often used for journeys into neighbouring Divisions. The main problem of supply is, undoubtedly, with wheelchairs, particularly during the summer months. The number of wheelchairs available in my Divisional area is more than adequate to meet the demand envisaged from patients whose need is of a temporary nature, e.g. accident and fracture cases. Unfortunately, well over ninety per cent of the annual demand originates from patients whose needs are permanent and for whom wheelchairs are available through the National Health Service. In such cases, subject to availability, I am able to make provision of a wheelchair on a strictly temporary basis of thirteen weeks only - in effect, a scheme to meet the demand, on a restricted basis, of as many patients as possible.



At the time of issue, a notification is forwarded to the family doctor, and to the patient, advising both on the procedure for obtaining a wheelchair through the National Health Service. Such a chair, supplied only in cases of permanent need, would remain with the patient for the rest of his/her natural life.

The following table shows the amount of equipment issued during the year:-

Item	Number of issues during the year
Bath seats	8
Bedding - pillows	1
Bedding - pillow cases	1
Bed blocks	1
Bed cradles	53
Bed pans	167
Bed rests	83
Bedsteads - with self-lifting poles	23
Bedsteads - ordinary	7
Bedsteads with cot sides	3
Chairs - 'Amesbury' - play	5
Chairs - stairway, carrying	2
Commodore	94
Enuresis alarms	92
Fracture boards	9
Hydraulic hoists	3
Lifting pole and chain	2
Mattresses	33
Mattresses - Ripple	1
Mattresses - Aeroprene	2
Pressure rings	34
Rubber sheets	117
Walking aids (including walking sticks)	108
Wheelchairs - folding	22
Wheelchairs - junior	6
Wheelchairs - self-propelled (hand)	50
Marathon Dri sheets	1
Bed rest with arms	2
Sleepskin medical pads	10
Urinals - male	46
Urinals - female	7
Protective pants	39
Cushion - Ripple	1
Feeding cup	1

#### Extra Nourishment

Number of patients in the Division receiving extra nourishment on 1st January, 1969	9
Number of patients granted extra nourishment during the year	-
Number of grants discontinued	4
Number of patients receiving extra nourishment on 31st December, 1969	5



I am still rather concerned by the high proportion of domiciliary cases treated by chiropodists within the area. The cost of a single domiciliary visit is nearly three times that of a clinic or surgery attendance and efforts will have to be made to reduce the domiciliary rate, without impairing the service. In addition to the cost of domiciliary treatment, there is already wasted professional time travelling from case to case.

Home Nursing statistics remain similar to last year's figures, but there has been quite a marked increase in the amount of work carried out by my staff in general practitioners' surgeries. With ever-increasing attachment of staff to family doctors, this part of the service is likely to expand even further.

I have included in the report a note on the working of the Home Help Service. Compared with last year, the number of cases has increased by about 7%, although the hours worked have only increased by about 2%. In addition to this note about the Home Help Service, I have given details of the types of equipment available to the public from the District Nursing Service. As is mentioned in this report, the supply of wheelchairs is our main difficulty and it is not generally appreciated that we only supply these on a temporary basis for three months, and those patients who require them permanently should obtain them via the Hospital Service. This, of course, means asking the family doctor to make a consultant appointment at hospital.

## IMMUNISATION AND

## VACCINATION



B.C.G. Vaccination

Contact Scheme - Once again, I am grateful to the Consultant Chest Physician for the following details of persons vaccinated at the Chest Clinic as contacts of known cases of tuberculosis.

	AGE (YEARS)			Total .
	0 - 4	5 - 15	16 +	
<u>Pre-vaccination Skin Test</u>				
No. skin tested	63	14	2	79
No. found positive	1	4	2	7
No. found negative	62	10	-	72
<u>No. vaccinated</u>	62	10	-	72

B.C.G. Vaccination of School Children

Acceptances

- (a) No. of children offered tuberculin testing and vaccination if necessary, whether the offer was made during the year or previously ... 1,290
- (b) No. of (a) found to have been vaccinated previously 34
- (c) No. of acceptances ... 1,191

Pre-vaccination Tuberculin Test

- (a) No. of children 2(c) tested ... 1,135
- (b) Result of test:-

	<u>Heaf Test</u>	<u>Mantoux Test</u>
(i) Positive	96	-
(ii) Negative	826	-
(iii) Not ascertained	213	-
		<u>Total 1,135</u>

Vaccination

- No. vaccinated:-
- (a) Following negative Heaf test ... 826
  - (b) Following negative Mantoux test ... -

Tuberculin test twelve months after vaccination

- (a) No. vaccinated in 1968 ... 736

Vaccination of Persons under Age 16 - Completed primary doses

<u>Type of vaccine or dose</u>	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962 - 1965		
Quadruple DTPP	-	-	-	-	-	-	-
Triple DTP	37	696	33	16	16	5	803
Diphtheria/Pertussis	-	-	-	-	-	-	-
Diphtheria/Tetanus	-	7	4	3	20	25	59
Diphtheria	-	-	-	-	-	-	-
Pertussis	-	-	-	-	-	-	-
Tetanus	-	1	1	1	9	34	46
Salk	-	-	-	-	-	-	-
Sabin	32	714	40	19	95	30	930
Measles	-	175	194	78	142	6	595
Lines 1+2+3+4+5 (Diphtheria)	37	703	37	19	36	30	862
Lines 1+2+3+6 (Whooping Cough)	37	696	33	16	16	5	803
Lines 1+2+4+7 (Tetanus)	37	704	38	20	45	64	908
Lines 1+8+9 (Polio)	32	714	40	19	95	30	930

Reinforcing Doses - Number of persons under age 16

<u>Type of vaccine or dose</u>	Year of Birth					Others under age 16	Total
	1969	1968	1967	1966	1962 - 1965		
Quadruple DTPP	-	-	-	-	-	-	-
Triple DTP	-	46	85	12	29	1	173
Diphtheria/Pertussis	-	-	-	-	-	-	-
Diphtheria/Tetanus	5	4	14	5	1294	51	1373
Diphtheria	-	-	-	-	3	1	4
Pertussis	-	-	-	-	-	-	-
Tetanus	-	-	9	4	44	113	170
Salk	-	-	-	-	-	-	-
Sabin	2	15	25	3	1500	77	1622
Measles	-	-	-	-	-	-	-
Lines 1+2+3+4+5 (Diphtheria)	5	50	99	17	1326	53	1550
Lines 1+2+3+6 (Whooping Cough)	-	46	85	12	29	1	173
Lines 1+2+4+7 (Tetanus)	5	50	108	21	1367	165	1716
Lines 1+8+9 (Polio)	2	15	25	3	1500	77	1622



Smallpox Vaccination - Persons aged under 16

Age at date of Vaccination	Number of persons vaccinated (or re-vaccinated during Period		Number of cases specially reported during period		
	Number Vaccinated	Number Revaccinated	(a) Generalised Vaccinia	(b) Post Vaccinal Encephalomyelitis	(c) Death from Complications of vaccination other than (a) and (b)
0-3 months	-	-	-	-	-
3-6 months	-	-	-	-	-
6-9 months	2	-	-	-	-
9-12 months	6	-	-	-	-
1	321	1	-	-	-
2-4	180	9	-	-	-
5-15	40	21	-	-	-
TOTAL :	549	31	-	-	-

The number of primary courses given of diphtheria, whooping cough, tetanus and polio. would appear to have dropped this year, but this is due to the switch-over to computerised records, producing this time lag in the completion of courses. However, the number of reinforcing doses of diphtheria, tetanus and polio, shows a marked increase from last year - a healthy sign.

B.C.G. vaccination also continues at a satisfactory level, but I would like to see an even higher acceptance rate by parents than at present.

I am concerned by the low rate for smallpox vaccination in infants. The great defence in any community against infectious disease is a high level of herd immunity which, if the present rates continue, will not be maintained.

A further point is that with the ever-increasing rate of world travel and the likelihood that many of our children will become globe trotters, they should be protected against smallpox. If many children are not vaccinated in infancy when the constitutional disturbance is minimal, then primary vaccination will have to be undertaken during adolescent adult life. This could be rather an upsetting affair.





The Service functioned satisfactorily during the year and close liaison, which must of necessity exist if the needs of the community are to be met, was maintained with the general practitioners and the hospitals. It is also pleasing to record the excellent degree of co-operation extended by the statutory and voluntary bodies associated with cases in which mutual interest lay and to note the positive steps these agencies took to provide the desired assistance for the persons concerned.

### Referrals

The number of new cases reported to my Mental Welfare Officers (excluding those referred for the specific purpose of securing admission to hospital) amounted to 137. Compared with the preceding year, this constituted a decrease of 24 and was accounted for by the fact that fewer referrals for care and after care services were received from the Out-Patient Clinics and Hospitals.

### Domiciliary Visits

#### (a) Mental Welfare Officers

Visits totalling 1,452 were paid to patients' homes during the course of the year. Whilst the end result, where intensive casework was required, was not always satisfactory, the help the Mental Welfare Officers were able to provide and the supportive measures they were responsible for introducing, enabled many of the patients concerned to settle in their home surroundings and lead a more useful life in the community.

#### (b) Consultant Psychiatrists

At the request of the Mental Welfare Officers, 70 patients were seen in their home surroundings by Consultant Psychiatrists from Middlewood Hospital, Sheffield, and St. Catherine's Hospital, Doncaster. In all cases attendance at an Out-Patient Clinic was impracticable due to either (a) the patient's very disturbed condition, or (b) the delay which would have needed to elapse before an appointment could have been secured.

### Out-Patient Clinics and Case Conferences

- The Division is well served by Psychiatric Out-Patient Clinics, sessions being held on Monday to Friday (inclusive) of each week at the Moorgate and Doncaster Gate Hospitals, Rotherham. When they were specifically requested to do so by the Consultant concerned and when the exigencies of the service at other times permitted, the Mental Welfare Officers attended clinical sessions.

Regular Case Conferences were held with the Consultants of both Middlewood and St. Catherine's Hospitals, when problems attached to particular cases were discussed and appropriate action taken.

### Hostels

Application for hostel accommodation were received in respect of one junior and four adult severely subnormal persons. The junior was admitted to The Ghyll, Skipton whilst one male adult and one female adult were admitted to hostel accommodation provided by the Rotherham and Sheffield Authorities respectively. The two remaining adults (one male and one female) were under consideration at the end of the year for eventual admission to a County Council hostel.



## Admission to Hospital

The Mental Welfare Officers were responsible for securing in-patient treatment for 106 persons who were admitted to hospital under the following Sections of the Mental Health Act:-

Section	Mentally Ill		Subnormal and Sev. / Subnormal		Total
	M	F	M	F	
5 (Informal)	14	19	7	24	64
25	14	10	-	-	24
26	-	1	-	-	1
29	6	11	-	-	17
	34	41	7	24	106

### Notes:

#### 1. Mentally Ill - Section 5

The figures include 2 elderly infirm males who were admitted as short-stay cases for the purpose of (a) stabilising their condition and, (b) relieving the family.

#### 2. Subnormal and Severely Subnormal - Section 5

One male and two female patients were admitted for prolonged care and treatment and will, no doubt, remain in hospital on a permanent basis; the remainder were accommodated as short-stay cases to relieve the family.

## Maltby Training Centre

There was a fairly high intake of new trainees, 22 junior and adult persons being admitted to the Centre, but as 13 trainees were discharged during the year, the increase in numbers was counter-balanced to a very large extent. At 31st December, 1969, the total number of names on the Centre register amounted to 137 (an increase of 9).

The extension to the Special Care Unit was completed and handed over on 25th November, but due to the short time available it was not possible to appoint an additional member of the staff and so permit the extension to become operational before the end of the year.

The inaugural meeting of the Parent/Teacher Association was held on 10th November, following which a Committee and Officers were elected. Regular meetings are now convened.

The care of the mentally disordered has received a considerable amount of publicity during recent years and whilst there are still sections of the public who retain fixed ideas and preconceived out-dated notions which are difficult to eradicate and which constitute a handicap to the field officer in his



work, people in general have a keener appreciation of the problems that exist and of the human factors involved. It is encouraging to note that there is, on the whole, a greater readiness to recognise that positive treatment can be obtained and that help and support can be provided to enable the more unfortunate members of society to remain at home and lead as normal a life as their disability will allow.

At the time of writing, I have only two Mental Welfare Officers on my staff, but it is hoped that a third officer will be appointed during the latter part of 1970. With the existing staff, it has been impossible to give as much time to the after-care of cases of acute mental illness and mental subnormality as one would have liked. I am sure that if we are successful in obtaining further staff, our services in this direction can be extended.

Mention has been made of the work of Maltby Training Centre. The setting up of a Parent Teacher Association can only lead to more satisfactory liaison between all concerned, children, parents and teachers alike. The new Special Care Unit is functioning well and we are hoping to develop new methods of training many of the very severely handicapped children who attend this part of the Centre.

For several years, there has been great difficulty in obtaining suitable staff at the Training Centre, but I feel now that things are much more settled and I look forward to a period of growth and stability in all its activities.

THE HEALTH OF THE  
SCHOOL CHILD



Defects found by periodic and special medical inspections during the year:-

Defect or Disease		Periodic Inspections				Special Inspect'n
		Entrants	Leavers	Others	Total	
Skin	T	-	-	-	-	-
	O	18	2	2	22	5
Eyes - a. Vision	T	25	2	19	46	7
	O	127	12	18	157	17
b. Squint	T	9	-	1	10	-
	O	52	2	5	59	2
c. Other	T	2	-	-	2	-
	O	12	2	-	14	1
Ears .- a. Hearing	T	5	-	-	5	1
	O	75	3	8	86	10
b. Otitis Media	T	1	-	-	1	-
	O	29	-	1	30	4
c. Other	T	3	-	-	3	-
	O	57	-	2	59	-
Nose and Throat	T	10	-	2	12	-
	O	145	2	11	158	18
Speech	T	17	-	3	20	-
	O	48	-	3	51	6
Lymphatic Glands	T	5	-	-	5	-
	O	76	1	6	83	3
Heart	T	2	-	1	3	1
	O	46	2	-	48	16
Lungs	T	-	-	-	-	-
	O	47	1	4	52	8
Developmental - a. Hernia	T	1	-	-	1	-
	O	14	-	-	14	2
b. Other	T	3	-	-	3	-
	O	81	-	3	84	5
Orthopaedic - a. Posture	T	-	-	-	-	-
	O	6	1	-	7	-
b. Feet	T	1	-	-	1	-
	O	9	1	2	12	-
c. Other	T	-	-	-	-	-
	O	23	3	-	26	3
Nervous System - a. Epilepsy	T	-	-	-	-	-
	O	9	1	-	10	1
b. Other	T	-	-	-	-	-
	O	22	1	2	25	1
Psychological - a. Development	T	1	-	-	1	-
	O	37	-	3	40	2
b. Stability	T	-	-	-	-	-
	O	4	-	1	5	1
Abdomen	T	-	-	-	-	-
	O	10	1	-	11	2
Other	T	-	-	2	2	-
	O	58	2	7	67	14
Totals	T	85	2	28	115	9
	O	1,005	37	78	1,120	121



## Periodic Medical Inspections

Age Groups inspected (By year of Birth)	Number of pupils who have received a full medical examination	Physical Condition of Pupils Inspctd.		Number of Pupils found not to warrant a medical examination	Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		Satisfactory No.	Unsatisfactory No.		for defective vision (excluding squint)	for any other condition recorded at Part 2	Total individual pupils
1965 and later	246	246	-	-	2	10	12
1964	662	662	-	-	11	18	27
1963	902	902	-	-	9	21	27
1962	188	188	-	-	5	5	9
1961	85	85	-	275	5	5	10
1960	38	38	-	-	5	2	7
1959	15	15	-	-	2	-	2
1958	9	9	-	-	3	-	3
1957	3	3	-	-	2	-	2
1956	-	-	-	-	-	-	-
1955	34	34	-	-	-	-	-
1954 and earlier	117	117	-	50	2	-	2
Total	2,299	2,299	-	225	46	61	101

## Cleanliness of School Children

A total of 14,103 children were examined by Health Visitors and School Nurses at cleanliness surveys in schools. 491 were found to be infested. Notices were issued in 16 cases.

## Diseases of the Skin

During the year, 5 children were treated for impetigo and 1 for scabies.

## Specialists' Clinics

### Ophthalmic Clinic

Number of children seen ... .. 1,420

Glasses were prescribed for 354 children

### Paediatric Clinic

Number of sessions held during the year ... .. 34

Number of individual patients seen:-

Pre-school Children

School Children

(a) New cases ... ..

10

9

(b) Cases attending from previous years

106

105

Total number of attendances

143

140



Speech Therapy Clinic

38 children were treated by the Speech Therapist

Number of children seen for the first time during year	33
Number of children attending for treatment from previous year	5
Number of children awaiting treatment at end of year	121
(a) Interviewed and placed on waiting list	61
(b) Not seen	70

Children discharged during the year:	<u>Boys</u>	<u>Girls</u>
Total	17	4
<u>Analysis</u>		
Speech normal	7	2
Unsuitable for treatment	1	-
Non-co-operation	7	2
Left district	1	-
Other reasons (attending another clinic)	1	-
Number of visits made to, schools	23	

Analysis of Children treated

Stammerers (Dysrhythmia)	...	...	...	1	-
Defects of Articulation due to:-					
(a) Cleft Palate	...	...	...	2	2
(b) Cerebral Palsy	...	...	...	-	-
(c) Other structural malformations	...	...	...	2	-
(d) Other causes e.g. neurological	...	...	...	2	1
(e) No specific cause found	...	...	...	15	4

Disorders of Language due to:-

(a) Retarded language development (non-specific)	4	2
(b) Retardation with associated subnormality	2	-
(c) Retardation associated with deafness	-	-
(d) Dysphasia	1	-
(e) Aphasia	-	-
(f) Other reasons	-	-

Child Guidance Clinic

Number of new cases treated during the year	...	88
Number of cases discharged or admitted for residential treatment	...	112
Number of cases carried forward	...	48

Training Colleges - Medical Examination of Entrants

111 entrants for Training Colleges were examined and reports submitted to the appropriate Colleges.

## Children and Young Persons' Act, 1933

The above Act requires children to be medically examined to decide their fitness for employment in entertainment or newspaper deliveries, etc. 41 children were examined under these regulations.

## Audiometry

1,271 children were tested by pure-tone audiometers during 1969. 50 were referred for investigation. 24 children are known to be using hearing aids.

## Dental Services

The following statistics in respect of 1969 have been supplied by Dr. H. Taylor, County Dental Officer :-

Number of children inspected	...	...	...	...	10,767
Number of children found to require treatment	...	...	...	...	7,023
Number of children offered treatment	...	...	...	...	5,977
Number of children treated	...	...	...	...	4,667
Number of attendances	...	...	...	...	12,719
Number of extractions - temporary	...	...	...	...	5,848
permanent	...	...	...	...	1,702
Number of general anaesthetics	...	...	...	...	2,705
Number of fillings - temporary	...	...	...	...	1,179
permanent	...	...	...	...	12,427

Since the death of Dr. C. C. Harvey, the number of paediatric clinic sessions has dropped considerably and in 1970, it is likely that this section of the school health service will be discontinued altogether. It has been impossible to replace Dr. Harvey on a permanent basis, due to the national shortage of paediatric specialists. In fact, the local hospitals have been without a permanent child health consultant for well over eighteen months now.

The figures for speech therapy have been considerably less this year but, of course, this is due to lack of staff. However, we have been fortunate enough to secure the services of Miss Bromley, who works six sessions per week within the Division and it may well be that further staff will be recruited during 1970.

Dr. K. Hopkirk left us during the year to take an appointment at Leicester. Dr. Shirley Hoyes replaced him within a few weeks. It was a particularly pleasing development to secure a first class successor to Dr. Hopkirk so rapidly, as I believe that before he came to the area in 1966, there had been a gap of at least two years without a consultant child psychiatrist.



# A M B U L A N C E   S E R V I C E

AMBULANCE SERVICE - Statistical Return 1.1.69. to 31.12.69.

Patients	January	February	March	April	May	June	July	August	September	October	November	December	Total
Out-patients	2,479	2,042	2,341	2,393	2,511	2,459	2,633	2,348	2,667	2,830	2,252	2,351	29,306
Admissions	265	240	274	248	291	261	242	235	224	299	252	259	3,090
Discharges	167	174	196	186	203	182	188	174	147	157	165	184	2,123
Transfers	16	22	14	10	30	16	17	14	9	20	17	23	208
Accident Patients	62	84	59	60	57	69	75	67	65	56	74	82	810
	2,989	2,562	2,884	2,897	3,092	2,987	3,155	2,838	3,112	3,362	2,760	2,899	35,537
Emergency Patients	177	175	181	156	204	167	158	142	161	189	153	175	2,038
Sitting Patients	2,673	2,238	2,545	2,587	2,702	2,674	2,839	2,487	2,791	3,007	2,427	2,518	31,488
Stretcher Patients	316	324	339	310	390	313	316	351	321	355	333	381	4,049
Miles:	22,009	18,900	20,543	19,721	21,359	20,589	22,873	21,157	21,255	23,207	20,531	21,774	253,918



In comparison with last year's figures, it is pleasing to note that the number of hospital out-patients using the service have fallen from 31,600 to 29,300. One can only conclude that more use is being made of cars and other forms of public transport to attend hospital. This is a highly desirable state of affairs since many man hours are wasted in the ambulance service waiting to collect out-patients from various hospital departments.

REPORT OF THE  
CHIEF PUBLIC HEALTH INSPECTOR



## Housing Statistics

Number of dwellinghouses in the District	21,620
Number of back-to-back houses included in the above	---

## Houses in Clearance Areas and Individual Unfit Houses

Number of houses included in representations made during the year :-

(a) Clearance areas	...	6
(b) Individual Unfit Houses	...	2

## Houses Demolished

	<u>Houses Demolished</u>	<u>Displaced during year</u>	
		<u>Persons</u>	<u>Families</u>

### In Clearance Areas:-

Houses Unfit for human habitation	6	4	2
--------------------------------------	---	---	---

### Not in Clearance Areas :-

As a result of formal  
or informal procedure  
under Section 17(1)

Housing Act, 1957	4	-	-
-------------------	---	---	---

Local Authority owned  
houses certified unfit

-	-	-
---	---	---

### Unfit Houses Closed :-

Under Section 16 (4)  
17 (1) and 35 (1) Housing  
Act, 1957

1	2	1
---	---	---

Parts of Buildings  
Closed under Section  
18, Housing Act,  
1957

-	-	-
---	---	---

In addition to the above 48 prefabricated dwellings owned by the local authority were demolished during the year and 6 privately owned houses were demolished to enable road development works to proceed.

## Unfit Houses made fit and Houses in which defects were remedied

	<u>By Owner</u>	<u>By Local Authority</u>
After informal action by Local Authority	157	-
After Formal Notice under Sections 9 & 16 of the Housing Act, 1957	2	1

During the year under review, formal action was taken in respect of 58 houses. Of this number 49 were repaired by owners and 9 by Local Authority acting in default of the owners.

Extensive proposals for the repair and improvement of one house in the parish of Whiston were accepted by the Council and as a result the Closing Order was revoked.

### New Houses

Number of new houses completed during the year :-

By Local Authority	...	169
By Private Enterprise	...	293

### Overcrowding

Number of dwellings known to be overcrowded at the end of the year	...	...	...	5
Number of families dwelling therein	...	...	...	8
Number of new cases of overcrowding reported during the year	...	...	...	1
Number of cases of overcrowding relieved during the year by Local Authority	...	...	...	-

### Slum Clearance

The following statement indicated the progress made since 1951 in the re-housing of families living in slum clearance property :-

#### Action taken resulting in re-housing

	1951/60	1961	1962	1963	1964	1965	1966	1967	1968	1969
Demolition Orders	173	20	10	2	9	8	5	5	6	-
Closing Orders	19	3	2	2	1	-	1	5	4	1
Undertakings	10	-	-	-	1	-	1	-	-	-
Clearance Areas	117	1	-	2	-	3	1	1	12	2

Four persons comprising three families living in Slum Clearance properties were re-housed during the year.

All the above houses were in the extended Slum Clearance Programme which has been further extended so that there are now 96 houses to be dealt with in that programme.

### Grants for Conversion or Improvement of Housing Accommodation

80 applications were received for grants for conversion or improvement of housing accommodation, 74 of which were approved. In 113 cases, works of improvement were completed during the year.

### Rent Act, 1957

One Certificate of Disrepair was issued during 1969.

### Houses offered for Sale to the Council

The Council adopted a policy whereby they would consider the purchase of property from elderly owner/occupiers who would prefer to move into bungalows or flats owned by the Council.

The question of purchase was subject to a report prepared by the Chief Public Health Inspector for consideration by the Housing Committee.



Reports on 106 houses were submitted for consideration during the year.

### Mortgages

I was asked to report as to the condition of all houses erected before 1945 which were the subject of mortgage applications.

This duty involved the preparation of a detailed report on each house, an estimate of the amount of money which should be retained as security until the repairs were carried out ; re-visits to verify that the repairs had been carried out satisfactorily before the amount retained was released.

Applications in respect of 24 houses were dealt with during the year.

### Nuisances

Nuisances outstanding at end of 1968	...	87
Nuisances found in 1969	... ..	255
Total requiring abatement	... ..	342
Total abated during 1969	... ..	250
Number of nuisances outstanding at end of 1969	... ..	92
Informal Notices served	... ..	255
Informal Notices complied with	... ..	250
Statutory Notices served	... ..	128
Statutory Notices complied with	... ..	99

### Noise Abatement Act, 1960

Seven noise nuisances were reported during the year. Three of these were industrial noises and four were of domestic origin.

All the domestic noise nuisances were remedied. One industrial noise was not established; one was remedied by the repair of defective silencers on excavation equipment and the remaining industrial noise, arising from steam exhaust, was still outstanding at the end of the year although there was a reduction in the frequency of occurrence.

In all, 60 visits were made in connection with these matters.

### Drainage and Sewerage

Number of houses connected to sewers	...	21,132
Number of houses with unsatisfactory drainage	... ..	50
Number of houses with satisfactory private drainage	... ..	438

Aughton Sewerage and Swallownest Sewage Disposal Schemes were completed during the year.

Listerdale Sewage Works and Netherthorpe (Aston Common) Sewer extensions were under construction at the end of the year.

The following schemes were awaiting approval or were in course of preparation :-



Bramley Sewerage Scheme  
Maltby/Rotherham R.D.C. Sewerage & Sewage Disposal Scheme  
Brinsworth, Catcliffe, Treeton and Whiston Sewerage & Sewage Disposal Scheme  
Dalton, Thrybergh, Silverwood Sewerage & Pumping Station Scheme  
Slade Hooton Sewage Disposal Works Extensions  
Brampton Bierlow and Cortonwood Sewerage & Sewage Disposal Works Scheme

Improvements of Sewage Disposal Works were also in hand at Ravenfield Common, Hooton Levitt and Bramley.

99.7% of the houses in the area are on water carriage system.

#### Private Drainage

A cesspool emptying service was operated by the Public Health Department. Four cesspool emptying vehicles were maintained for this purpose and the equivalent of two and a half vehicles were engaged on this work.

In the outlying parts of the district, which are not sewered, there were 416 houses drained to 275 cesspools. (In some cases, two or more houses were drained to one cesspool). There was no increase in the number of cesspools in the district during the year.

In accordance with the Building Regulations, 1965 a minimum storage capacity of 4,000 gallons per house was specified for each new cesspool. A fortnightly emptying service was maintained throughout the year.

The Policy of providing small sewage treatment plants instead of cesspools was still being pursued and there were 11 units in use in the district. The settlement tanks were de-sludged every six months by the cesspool emptying vehicles.

The annual cost of emptying each cesspool for financial year ended 31st March, 1969 was £25. 8s. 3d.

#### Water Supply

Sheffield Corporation was the water undertaker for this district, and fringe supplies were obtained from Rotherham Corporation for parts of the parishes of Whiston and Dalton.

Earl Fitzwilliam's Wentworth Estates' distributed water in the parish of Wentworth and the south west part of Brampton Bierlow parish. Water was bought in bulk from Sheffield Corporation.

The following water sample results indicate the chemical composition of water supplied in the area :-

Sample No. 1	- Sheffield Yorkshire Derwent Water (Taken at Thrybergh)
Sample No. 2	- Sheffield Redmires Water - (Taken at Aston)



<u>Physical Character</u>	<u>Number 1</u>	<u>Number 2</u>
Suspended Matter	None	None
Appearance of column 2 ft. long	Clear : Colourless	Clear : Slightly Yellow
Taste	Normal	Normal
Odour	None	None
<u>Chemical Examination</u>	<u>Number 1</u>	<u>Number 2</u>
	<u>Parts</u>	<u>per Million</u>
Total Solids dried at 180° C	252.0	218.0
Chlorides in terms of chlorine	37.0	14.0
Equivalent of Sodium Chloride	61.0	23.0
Nitrates	None	Faint Trace
Nitrates as Nitrogen	1.46	0.97
Poisonous metals (lead, etc.)	Less than 0.04	Less than 0.04
Total hardness	94.0	62.0
Temporary hardness	20.1	15.1
Permanent hardness	73.9	46.9
Oxygen absorbed in 4 hours at 80°F	0.32	0.76
Ammoniacal Nitrogen	0.040	0.032
Free Chlorine	None	0.17
pH Value	8.0	8.0
Fluoride as F by the distillation method	0.09	0.12
Albuminoid Nitrogen	0.080	0.040

The new Pumping Station at Dalton was completed, but further associated pipework has still to be laid.

The 12" diameter main from Dalton Reservoir to Wickersley Reservoir was completed and the 15" diameter main from Doncaster Road, Dalton to Dalton Reservoir was under construction.

Towards the end of the year, work was started on new suction and delivery pipework at Wickersley booster station.

The laying of approximately 4,800 yards of 3", 4" and 6" diameter mains was carried out in the districts listed below :-

Wickersley	Bramley	Thurcroft
Aston	Thrybergh	Brinsworth
Orgreave	Laughton	Whiston
Swallownest		

There was an estimated increase of 1.6% in the water consumption during the year which was slightly less than the 3% increase estimated for 1968. It is estimated that the annual water consumption in the district is 790 million gallons.

Water samples were examined periodically for plumbo-solvency and all samples examined during the year were found to be satisfactory.

Only one house in the district (Bungalow, Mansfield Road, Aston), was without a piped water supply, water being obtained from a nearby factory. No action was contemplated as this house will be demolished when road making works begin.

The following four houses had private water supplies :-

The Danes, Dalton Parva  
Spa Farm, Treeton  
Spa Farm Cottages, Treeton  
(2 houses)

Spring Supply  
Spring Supply  
Spring Supply

All samples of the spring water supply at Spa Farm and Cottages, Treeton revealed contamination and the owner in liaison with the Ministry of Agriculture Fisheries and Food, continued their efforts to eliminate the source of pollution. This water was fit for human consumption until it became polluted last year. The provision of a public supply is difficult to arrange because of the remote situation of the property.

#### Tents, Vans and Sheds

The Council relied on the legal provisions contained in the Rotherham Rural District Council Act, 1931 for the control of caravans and caravan sites in the area.

This Local Act made it illegal for anyone to occupy a tent, van, shed or similar structure without obtaining the prior approval of the Council, the effect of which was to make it possible to exercise greater control over this type of dwelling.

All applications for permission to occupy caravans in the area were considered by the Public Health Committee and, where circumstances warranted it, permission was granted for specific periods and extended permission was granted as circumstances required.

Six applications were received during the year; all the applicants were granted permission to occupy caravans in the area initially for periods of six months.

Eight applications were received for extended permission from persons living in caravans in the area, all of which were granted.

On the 31st December, 1969 there were eight caravans sited in the area, compared with ten on the 31st December, 1968.

#### Factories Act, 1961

Inspections for purposes of provisions as to Health :-

<u>Premises</u>	<u>No. on Register</u>	<u>No. of Inspections</u>	<u>Written Notices</u>	<u>Occupiers Prosecuted</u>
1. Factories in which Secs. 1, 2, 3, 4 & 6 are to be enforced by the Local Authorities	5	3	-	-
2. Factories not included in (1) in which Sec. 7 is enforced by the Local Authorities	96	75	8	-
3. Other premises in which Sec. 7 is enforced by Local Authority (Excluding Out- Workers' premises)	114	56	10	-



### Cases in which defects were found

<u>Premises</u>	<u>Found</u>	<u>Remedied</u>	<u>Referred</u>		<u>No. of cases in which pros- ecutions were instituted</u>
			<u>To H. M. Inspctr</u>	<u>By H. M. Inspctr</u>	
Want of cleanliness	-	-	-	-	-
Overcrowding	-	-	-	-	-
Unreasonable Temperature	-	-	-	-	-
Inadequate ventilation	-	-	-	-	-
Ineffective drainage of Floors	-	-	-	-	-
<u>Sanitary Conveniences</u>					
(a) Insufficient	10	10	-	2	-
(b) Unsuitable or defective	8	8	-	1	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the Act (not including Offences relating to outwork)	-	-	-	-	-
	18	18	-	3	-

### Atmospheric Pollution

This Council was a constituent member of the Sheffield and District Clean Air Committee, but the administration of the Clean Air Act, 1956 (Smoke Control Area) was the responsibility of the Council.

No progress was made during the year in forming Smoke Control Areas, but a Survey Assistant was appointed in May, 1963 to carry out a preliminary survey of the whole area.

The Survey of the district was completed during the year, but the completion coincided with the problem which arose as a result of the shortage of solid smokeless fuel. This was a regrettable and untimely coincidence as far as this district was concerned, particularly as it is situate in a 'black area'.

When the question of 'Clean Air' arises in coal mining areas, there is an inherent interest in the use of solid fuel as a medium for compliance with Smoke Control Orders and an acknowledged national shortage, which should have been foreseen - creates a suspicion of possible repetition which is not easily overcome. For this reason the formation of a National fuel policy is most desirable.

### Rodent Control

Two full-time Rodent Operatives were employed in the Department.

During the year 578 premises were visited in connection with rodent infestations.

414 premises were infested with rats and 110 were found to be infested with mice. Two sewer maintenance treatments were carried out during the year.

The cost of treating business premises was recovered from the occupiers of the premises on a labour/material/establishment charge basis.

Rodent control work at farms was undertaken by the staff of the department. The work entailed the surveying of premises and where evidence of infestations was found, the disinfestation work was carried out at a charge of 12s. 1d. pr. hour. In all 84 farms received attention during the year.

No evidence of poison prejudice or immunity to poisons was noted during the year.

#### Registration of Hairdressers and Barbers

By the adoption of Section 120 of the West Riding County Council (General Powers) Act, 1951, and bye-laws thereunder, the registration of Hairdressers and Barbers became compulsory.

Two establishments were registered during the year and there were 50 premises on the register on the 31st December, 1969.

45 visits were made during the year and the standard of hygiene was found to be satisfactory.

#### Agriculture (Safety, Health and Welfare Provisions) Act, 1956

No action was necessary during the year.

#### Offices, Shops and Railway Premises Act, 1963

Details of registrations and general inspections are as follows :-

<u>Class of Premises</u>	<u>Number of Premises Registered during the Year</u>	<u>Total Number of Registered Premises at end of Year</u>	<u>Number of Registered Premises Receiving gen. Insptns in yr.</u>
Offices	1	25	19
Retail Shops	9	154	142
Wholesale Shops & Warehouses	1	5	4
Catering Establishments open to public, canteens	2	33	33
Fuel Storage Depots	-	-	-

Analysis by workplace of persons employed in registered premises at end of year :-

<u>Class of Workplace</u>	<u>Number of Persons Employed</u>
Offices	204
Retail Shops	496
Wholesale Department, Warehouses	61
Catering Establishments Open to the Public	165
Canteens	11
Fuel Storage Depots	1
Total (Total Males - 276: Total Females - 662)	938



Number of infringement notices outstanding on the 1st January, 1969	19
Number of infringement notices served during 1969	73
Number of infringement notices complied with during 1969	58
Number of premises not complying with Act on 31st December, 1969	34

No difficulties were encountered in connection with the operation of the general provisions of the Act.

There were only two accidents reported during the year, both of which were investigated. One accident occurred in a warehouse and the other in an office, but neither case involved negligence on the part of the firm.

A schedule of infringements noted and remedied during the year is set out on the following page.

Matters found Requiring attention	Offices		Retail Shops		Wholesale Shops & Warehouses		Catering Establishments and Canteens	
	No. noted	Remedied	No. noted	Remedied	No. noted	Remedied	No. noted	Remedied
Cleanliness	1	1	20	11	1	-	-	-
Overcrowding	-	-	-	-	-	-	-	-
Insufficient Temperature	4	1	17	12	1	1	-	1
Ventilation	-	-	4	5	1	-	-	-
Lighting	1	1	11	7	-	-	-	-
Sanitary Accommodation	-	-	13	4	1	1	-	-
Washing Facilities	1	-	9	4	1	-	-	-
Drinking Water	-	-	-	-	-	-	-	-
Accommodation for Clothing	-	-	3	1	1	1	-	-
Seating Arrangements	-	-	3	3	-	-	-	-
Seats for Sedentary Workers	-	-	-	-	-	-	-	-
Floors, Passages and Stairs	-	-	14	10	-	-	-	-
Fencing Exposed Machinery	-	-	5	5	-	-	-	-
Eating Facilities	-	-	-	-	-	-	-	-
Training of employees working at dangerous machinery	-	-	-	-	-	-	-	-
Cleaning Machinery	-	-	1	-	-	-	-	-
Prohibition of Heavy Work	-	-	-	-	-	-	-	-
First Aid	6	2	26	20	2	1	1	-
Dangerous conditions and practices	-	-	-	-	-	-	-	-
Information for Employees on display	3	-	39	31	1	2	3	3
	16	5	165	113	9	6	4	4



## Supervision of Food Supply

### Milk Supply

During 1969 287 samples of milk were taken compared with 220 samples taken in 1968.

Whenever samples of 'Untreated Milk' were reported unsatisfactory, the results were forwarded to the Milk Production Officer for such action as he might consider necessary.

The following table gives a summary of milk sample results :-

	<u>Satisfactory</u>	<u>Unsatisfactory</u>
Pasteurised	198	5
Sterilized	25	1
Untreated	47	8
U.H.T.	3	-

The Officers of the West Riding County Council continued their activities in connection with the sampling of 'untreated' milk for the detection of Brucella Abortus.

The Ring Test was used for the purpose of monitoring the samples and positive samples were submitted for cream culture examinations.

38 samples of 'untreated' milk were examined with the following results :-

<u>Ring Test</u>		<u>Cream Culture</u>	
Positive -	6	Positive -	2
Negative -	29	Negative -	2
Doubtful -	3		

During the year, notices were served prohibiting the sale of 'untreated' milk from two farms in the district.

Legal Action was taken under the Milk and Dairies (General) Regulations, 1959 against a producer who supplied milk in a dirty bottle. A fine of £5 was imposed with 2 guineas costs.

### Slaughtering Facilities and Meat Inspection

The 1st January, 1962 was the day appointed by the Ministry of Agriculture, Fisheries and Food for the construction Regulations to apply to all slaughterhouses in the area. There were four licensed slaughterhouses in use in the area.

The scale of charges adopted were the maximum prescribed by the Regulations :-

2s. 6d. per horse or bovine animal  
9d. per calf or pig  
6d. per sheep, lamb or goat.

These charges were arrived at after taking into consideration the time spent (including overtime each weekend) by members of the Staff on meat inspection in relation to their salaries, travelling expenses, and other sundry expenses. The total annual charge made for the meat inspection service amounted to £135. 1s. 3d.

There was a reciprocal agreement between this Council, Kiveton Park Rural District Council and Rawmarsh Urban District Council to assist each other whenever the need arose.

I give below statistical data relating to the meat inspection service for the year ended 31st December, 1969 :-

Carcases and Offal Inspected and Condemned in Whole or in Part

	<u>Cattle</u> <u>Excluding</u> <u>Cows</u>	<u>Cows</u>	<u>Calves</u>	<u>Sheep</u> <u>and</u> <u>Lambs</u>	<u>Pigs</u>
Number Killed	583	3	-	1,265	824
Number Inspected	583	3	-	1,265	824

All Diseases except Tuberculosis and Cysticercosis

Whole carcasses condemned -	-	-	-	-	1
Carcases of which some part of organ was condemned	124	-	-	38	34
Percentage of the number inspected affected with diseases other than tuberculosis and cysticercosis	21.28	-	-	3.0	4.24

Tuberculosis Only

Whole carcasses condemned -	-	-	-	-	-
Carcases of which some part or organ was condemned	-	-	-	-	2
Percentage of the number affected	-	-	-	-	0.23

Cysticercosis

Carcase of which some part or organ was condemned	-	-	-	-	-
Carcase submitted to treatment by refrigeration	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-

The following organs and parts were condemned as being unfit for human consumption :-

Tuberculosis

<u>Pigs</u>	2 sets of intestines
	1 head

Cysticercosis

<u>Cattle</u>	Nil
---------------	-----



## Other Diseases

### Cattle

56 part livers  
26 livers  
31 livers  
3 skirts  
1 liver  
2 kidneys  
4 sets lungs  
1 heart  
6 lb. beef

Distomatosis  
Distomatosis  
Abcesses  
Abcesses  
Hydatid Cysts  
Nephritis  
Pneumonia  
Pericaditis  
Bruising

### Sheep

13 livers  
3 livers  
3 hearts  
2 sets lungs  
1 heart  
16 livers

Distomatosis  
Abcesses  
Cysts  
Abcesses  
Pericarditis  
Parasitic

### Pigs

1 carcase and all organs  
12 hearts  
8 sets lungs  
11 livers  
1 liver  
3 livers  
1 liver  
1 hock

Acute Septic Pneumonia  
Pericarditis  
Pneumonia  
Ascariasis  
Abcesses  
Cirrhosis  
Congestion  
Trauma

There are only four licenced slaughterhouses in this district, and each has a limited throughput, and there are no facilities for the sterilisation of condemned meat.

In each case exemption was granted under the provisions of Part II of the Meat (Sterilisation) Regulations, 1969 by an arrangement in writing with the Chief Public Health Inspector whereby condemned meat was removed to a place where it was sterilised.

The Slaughter of Animals Register contained the names and addresses of twenty-nine licensed slaughtermen :-

8 were licensed for the slaughter of pigs only

21 were licensed to slaughter all animals, except horses.

The Cash Captive Bolt was the instrument in general use for the stunning of animals.

## Unfit Food

The following quantities of foodstuffs were found to be unfit for human consumption at shops, and voluntarily surrendered by the owners :-

### Canned Foods

#### Cans

#### Weight

Boiled Ham

119

614 lbs. 4 ozs.

Other Meats

563

901 lbs.

Fruit

149

158 lbs. 12 ozs.

Tomatoes

105

83 lbs. 4 ozs.

<u>Canned Foods</u>	<u>Cans</u>	<u>Weight</u>
Fish	347	155 lbs. 12 ozs.
Fruit Juice	24	33 lbs. 4 ozs.
Peas	182	117 lbs.
Green Beans	50	24 lbs. 4 ozs.
Potatoes	26	30 lbs 12 ozs.
Carrots	11	7 lbs. 8 ozs.
Beans	7	3 lbs. 4 ozs.
Rice Pudding	12	19 lbs.
Evaporated Milk	1	3 lbs. 12 ozs.
Soups	3	2 lbs. 8 ozs.
Chicken	2	8 lbs. 12 ozs.
Curry	2	2 lbs. 12 ozs.
Tomato Puree	2	4 lbs. 12 ozs.
Mixed Vegetables	4	3 lbs. 8 ozs.

<u>Other Foods</u>		
Pickles	1 Jar	12 ozs.
Jam	6 Jars	6 lbs.
Cake		3 lbs.
Cheese		19 lbs. 4 ozs.
Dried Fruit		9 lbs. 4 ozs.
Meat Paste		4 ozs.
Bacon		1,482 lbs. 12 ozs.
Peanuts		6 lbs. 8 ozs.
Raw Meat		252 lbs.8 ozs.
Meat Pies	123	49 lbs. 12 ozs.

#### Unfit Food through Break-down in Refrigeration

15	Packets of Sausage	7 lbs. 8 ozs.
115	Packets of Peas	62 lbs. 12 ozs.
26	Packets of Beans	11 lbs. 8 ozs.
7	Packets of sprouts	4 lbs. 4 ozs.
12	Packets of Broadbeans	4 lbs. 12 ozs.
10	Packets of Mixed Vegetables	5 lbs.
6	Packets of Sweet Corn	2 lbs. 4 ozs.
38	Packets of Chips	14 lbs. 12 ozs.
3	Packets of Spinach	1 lb. 8 ozs.
41	Packets of Puffed Pastry	19 lbs. 12 ozs.
15	Packets of Raspberries	7 lbs. 8 ozs.
18	Packets of Kippers	9 lbs.
11	Packets of Haddock	6 lbs. 12 ozs.
15	Packets of Plaice	7 lbs. 12 ozs.
77	Packets of Cod	42 lbs.
8	Packets of Fish Fingers	6 lbs. 8 ozs.
32	Packets of Fish Cakes	11 lbs. 8 ozs.
11	Packets of Fish and Chips	6 lbs. 4 ozs.
62	Steak and Kidney Pies	19 lbs. 8 ozs.
15	Chicken Pies	4 lbs. 8 ozs.
19	Packets of Sliced Beef	6 lbs. 8 ozs.
14	Packets of Steaklets	6 lbs. 12 ozs.
24	Packets of Rissoles	7 lbs. 8 ozs.
94	Packets of Beefburgers	42 lbs. 12 ozs.
2	Packets of Sirloin	3 lbs.
38	Packets of Lamb	56 lbs. 4 ozs.
5	Packets of Pork	4 lbs. 8 ozs.



30	Packets of Liver	15 lbs.
28	Packets of Kidney	14 lbs.
13	Packets of Beef	14 lbs. 8ozs.
5	Packets of Rabbit	13 lbs.
3	Packets of Bacon	4 lbs. 8 ozs.
8	Packets of Savoury Cakes	2 lbs.
7	Packets of Salmon Cakes	1 lb. 12 ozs.

### Ice-Cream Premises

There were 167 premises in the area registered for the sale and storage of ice-cream and 2 shops registered for the manufacture, storage and sale of ice-cream.

96 visits were made to registered premises during the year and in all cases the premises were found to be satisfactory.

142 samples of ice-cream were taken during the year and the results were as follows :-

Samples classified in Provisional Grade 1	89
Samples classified in Provisional Grade 2	26
Samples classified in Provisional Grade 3	14
Samples classified in Provisional Grade 4	13

Retailers were notified of all sample results and unsatisfactory results were sent to the manufacturers and to the local authority in whose area the ice-cream was manufactured.

63 of the 142 samples taken were from retail vehicles, the remaining 79 were samples of wrapped ice-cream taken from registered shop premises.

These can be further classified :-

	<u>Vehicles</u>				<u>Premises</u>			
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>
Soft Ice-Cream	24	7	10	12	-	-	-	-
Wrapped Ice-Cream	5	5	-	-	60	14	4	1

### Supervision of Food Premises

The following is a classified list of food premises in the area :-

Food Factories	...	3
Grocers and General Dealers	...	179
Hotels and Licensed Premises		54
Butchers' Shops	...	45
Fish Frying Premises	...	34
Canteen Premises	...	33
Bakehouses	...	7
Registered Food Preparation Premises		36
Slaughterhouses	...	4
Chemists' Shops	...	12
Cafes	...	7

In connection with duties under the Food Hygiene Regulations, 623 visits were made to food premises and mobile shops. As a result, 92 informal notices were addressed to the occupiers of the premises and proprietors of mobile shops of which 66 were abated.



No application was received for a Certificate of Exemption under Regulation 31 of the Food Hygiene Regulations.

In connection with Regulations 15, 16 & 19 of the Food Hygiene Regulations, all occupiers of food premises, whether self-contained shops or house shops, were required to provide separate fixed wash basins and sinks with a constant supply of hot water and cold water from taps over the sinks. The washing facilities (person and equipment) were required to be sited in convenient positions on the premises.

Legal action was taken under the provisions of the Food Hygiene Regulations regarding the unsatisfactory condition of premises used for the preparation of food. The user of the premises was convicted and a fine of £20 was imposed.

#### Public Cleansing

The Chief Public Health Inspector was also Cleansing Superintendent and was responsible for the operation of the refuse collection and cesspool emptying services of the Council.

The public cleansing fleet consisted of :-

- 4 Karrier Ramillies continuous loading refuse vehicles
- 3 Dennis (10 cubic yard) side loading refuse vehicles
- 4 Dennis Paxit III Continuous loading refuse vehicles
- 3 Dennis Cesspool Emptying Vehicles
- 1 Bedford Cesspool Emptying Vehicle
- 1 Chaseside Mechanical Shovel
- 1 International Mechanical Shovel
- 1 Land Rover for use of mechanics
- 2 Yorkshire Suction Street Sweepers, (Karrier Chassis)

Generally, a weekly collection was maintained throughout the district, but during holidays (particularly statutory holidays) the interval of collection extended to ten days.

The collection and disposal of refuse in the northern parishes of Brampton Bierlow and Wentworth was carried out by contract.

The Council operated a scheme for the supply of all dustbins in the area for the storage of household refuse. Under this scheme, the following bins were supplied during 1969 :-

Dustbins supplied to new private houses	300
Replacement dustbins supplied to private houses	843
Dustbins supplied to new Council houses	163
Replacement dustbins supplied to Council houses	461

A total of 1,767 dustbins were issued at a cost of £3,481. 1s. 6d.

#### Operational Statistics

Total amount of refuse collected and disposed of	23,814 tons
Number of premises from which refuse was collected	22,188 premises
Average haul by vehicles to disposal point	4 miles
Cost per 1,000 population :-	
Collection	£895
Disposal	£86



Incentive Bonus Scheme

In all probability this year will mark the end of the refuse collection bonus scheme which was introduced in 1954 at a time when it was difficult to maintain a labour force sufficient to provide a satisfactory service. The Council was in competition with local industry where there was a high level of employment at enhanced rates of pay, together with overtime.

The working of overtime on refuse collection failed to improve the service. The average frequency of collection was fortnightly and, on occasions, extended to almost three weeks, and to say that complaints were numerous is no understatement.

It was decided to abandon overtime and embark on an incentive bonus scheme which was simple in its concept.

A target was fixed according to the number of men constituting a team on any given day and each day stood on its own for bonus working purposes. Payment was made for each dustbin emptied in excess of the daily target and the total amount was divided equally among the men. The bonus entitlement was calculated daily and paid weekly.

At the outset this scheme was met with suspicion by the workmen and was frowned upon by the employers representatives, but the Council remained inflexible and it was eventually accepted in good faith by all parties.

The scheme has been invaluable in maintaining a satisfactory service in that it attracted labour, introduced a sense of urgency, and proved economical and I hereunder set out brief statement which makes this self-evident.

<u>Date</u>	<u>No. of Men</u>	<u>Population</u>	<u>Average Frequency of Collection</u>
1954 (Pre-Bonus)	34	51,280	14
1969	32	66,690	8

The workmen's Union applied for an adjustment in the rate of unit payments and when the amended rate was submitted for approval the Ministry of Housing & Local Government gave consent subject to the Council giving an undertaking to apply work study to the Service. An undertaking was given and London Boroughs' Management Services were engaged, and their findings were awaited at the end of the year.

This is sound policy if the advantages of the original scheme are to be preserved in a form acceptable to the trade union and employer alike and if the good relationship between Management and men is to be maintained which is an essential element for the success of any project.

Refuse Disposal

Refuse was disposed of by controlled tipping at five sites in the district. In the southern part of the district sufficient land was available to ensure continuity of disposal facilities for a considerable period but, evenso, proposals were in hand for the purchase of quarries and railway cuttings to make further provision for refuse disposal.



In the northern part of the district (Brampton Bierlow and Wentworth) the position is less satisfactory in that the disposal sites used at present are the only known sites suitable for this purpose.

It is important that the policy of acquiring land be pursued because it would appear that local authorities will be faced with the possibility of having to extend their collection services to deal with garden refuse, bulky household articles, and a free service for the collection of trade refuse as a contribution towards the preservation of the amenities of their districts.

The question of the provision of refuse treatment plants is becoming of increasing importance so as to extend the life of land available for final disposal.

The Council provided a free service to residents in the area for the collection and disposal of old cars, and bulky articles. Both services are available on request.

One person was convicted for sorting refuse on a refuse tip and a fine of £5 was imposed.

### Street Sweeping

The street sweeping service operated by the Council for the sweeping of all Class III and Unclassified roads was augmented by the employment of labourers to work with the machines to assist in the sweeping of footpaths and sections of the streets not accessible to the machines.

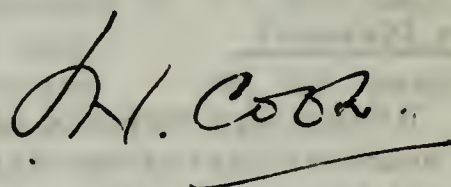
There were 44.24 miles of Class III roads and 102 miles of Unclassified roads in the district and two machines were employed on this work.

### Civic Amenities Act, 1967 - Abandoned Cars

There was a slight fall in the number of abandoned cars found in the district during the year :-

1965	-	4 cars found abandoned
1966	-	24 cars found abandoned
1967	-	56 cars found abandoned
1968	-	67 cars found abandoned
1969	-	60 cars found abandoned

Abandoned vehicles were collected for disposal by a private firm at a cost of £1 per vehicle, and costs were recovered in accordance with the provisions of the Civic Amenities Act, where owners were traced.



Chief Public Health Inspector.



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